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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000092483

1. Corporation Name

ORIOLE OF NAPLES, INC.

| Principal Place | o of Business | Mailing Address | | | 1 Ideilan 120 Ideil de la company de la comp | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 10100 1111 1001 |
|--|---|--|-------------------------|---|--|---|-----------------|
| 1690 SO. CONGRESS AVENUE STE. 200 | | 1690 SO. CONGRESS AVENUE STE. 200 | | | | | |
| DELRAY BEACH | | DELRAY BEACH FL 33445 | | DO NOT WRITE IN TI | HIS SPACE | | |
| | | | | | 3. Date Incorporated or Qualifed | IIO OF AGE | |
| | | | | | 12/22/1994 | | |
| 2 D===== D | Inna of Punings | 2a, Mailing Address | | | 4, FEI Number | Anı | plied For |
| – | lace of Business | 26 | | 65-0551606 | <u> </u> | t Applicable | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | _ | \$8.75 A | | |
| 22 | | 27 | | 5. Certifcate of Status Desired | Fee Rec | | |
| City & State | | City & State | | 6. Election Campaign Financing | \$5.00 | May Be | |
| 3 | | 28 | | Trust Fund Contribution | Added to | | |
| Zip Country | | Zip | | | 8. This corporation owes the current year | · Intangible | |
| 24 | 25 | 29 30 | ו | | Personal Property Tax. | Yes | □No |
| | 9. Name and Address of Curren | nt Registered Agent | | | 10. Name and Address of New Register | ed Agent | |
| | | | 81 | Name | | | |
| PIVINSKI, JOSEPH | | | 82 | Street Add | dress (P.O. Box Number is Not Acceptable) | | |
| | SO. CONGRESS AVENUE STE | . 200 | | | | | |
| DELL | RAY BEACH FL 33445 | | 83 | | | | |
| | | | 84 | City | | 85 Zip C | Code |
| | | | ì | the above-named corporation submits this statement for the purpose of changing its registered | | | |
| office or r agent. I a SIGNATURE | m familiar with, and accept the obligation of registered ages | nt and little if applicable. (NOTE: Re | Statutes | | tion's board of directors. I hereby accept the application is board of directors. I hereby accept the application is board of directors. I hereby accept the application is board of directors. I hereby accept the application is board of directors. I hereby accept the application is board of directors. I hereby accept the application is board of directors. | | |
| 12. | OFFICERS AND DIRECTORS | | 13. | | ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO | Addition |
| TITLE | CD | ☐ DELETE | 1.1 TITLE | | | □ Change | L Addition |
| NAME | LEVY, RICHARD D. | | 1.2 NAME | \ | | | ļ |
| STREET ADDRESS | | | 1.3 STREET ADDRESS | | | | |
| CITY-ST-ZIP | DELRAY BEACH FL | | 1,4 CITY-S | T-ZIP | | ☐ Change | Addition |
| TITLE | PD | ☐ DELETE | 2.1 TITLE | | | Change | ☐ Addition |
| NAME | ELVI, INVICTA | | 2.2 NAME | | | | j |
| STREET ADDRESS | | | | TADDRESS | | | |
| CITY-ST-ZIP | | | 2,4 CITY-S | ST-ZIP | | Change | Addition |
| TITLE | | | 3,1 TITLE | | | □ ourido | |
| NAME | PIVINSKI, JOSEPH | - 000 | 3,2 NAME | | | | |
| STREET ADDRESS | | 200 | | TADDRESS | | | |
| CITY-ST-ZIP | DELRAY BEACH FL 33445 | □ ACLETE | 3.4. CITY-5 | ST-ZIP | | Change | Addition |
| JII/E | | | 4.1 TITLE. 4.2 NAME | 1 | | | |
| NAME | LEVY, HARRY A. | | | | | | |
| STREET ADDRESS | 1000 01 001/141/1400 | | , | T ADDRESS | | | |
| CITY-ST-ZIP | | | 4.4 CITY-S 5.1 TITLE | I-ZIP | | Change | Addition |
| TITLE | • | | 5.1 IIILE 5.2 NAME | | | | |
| NAME | GRAVETT, STEPHEN A. | - 000 | | TADORESS | | | |
| STREET ADDRESS | 1 | 200 | 5.4 City-S | | | | |
| CITY-ST-ZIP | DELRAY BEACH FL | ☐ DELETE | 6.1 TITLE | | | ☐ Change | Addition |
| TITLE | | | 6.2 NAME | | | _ • | _ |
| | | | | | | | |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on as attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/99

(561) 274-2000