FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000006112 (3)

LANTANA NAPLES, INC.

FILED Apr 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					1 INDIIAALI IED IDIAL OEKEE ADAIN MAILI AALII 61	kul adılın dilibi kidəli üldiğ ildi ildi ildi
1300 THOMASWOOD DRIVE 1300 THOMASWOOD E TALLAHASSEE FL 32312 TALLAHASSEE FL 32312			DRIVE 12		DO NOT WRITE IN	THIS SDACE
					3. Date Incorporated or Qualified	TIS SPACE
1					01/24/1995	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0549691	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 Additional
22		27			Certificate of Status Desired	Fee Required
City & Stat	е	City & State			6. Election Campaign Financing	\$5.00 May Be
Z ip	Country	[28]	Count		Trust Fund Contribution L	
24]	Country Zip 29 30		<u> </u>	Country 8. This corporation owes or has paid the current year Intangible		
[29]	9. Name and Address of Curre		1301		Personal Property Tax due June 30. 10. Name and Address of New Register 10. Personal Property Tax due June 30.	Yes No
RI	ST, MICHAEL P		8	1 Name	To, Traine and Addition of How Hogist	neu Agent
	00 THOMASWOOD DRIVE					
TALLAHASSEE FL 32312			8:	2 Street Addr	ress (P.O. Box Number is Not Acceptable)	
"			8	3		
			_	 		
			B	City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Stati	utes, the abo	ve-named corp	poration submits this statement for the purpo	se of changing its registered
agent. La	egistered agent, or both, in the Stat m familiar with, and accept the obli	e of Florida. Such change was gations of, Section 607,0505, f	s authorized t Florida Statute	by the corporations.	ion's board of directors. I hereby accept the	appointment as registered
SIGNATURE		•				
	Signature, typod or printed name of requitered as			pent eignature requir		NE
12.	OFFICERS AT	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	ROGERS, GAYLE M	☐ DELETE	1.1 TITLE			Change Addition
444 644667447 677747			1.2 NAME			
STREET ADDRESS	CHATTANOOGA TN 37402	NIE 300		T ADDRESS		
CITY-ST-ZIP TITLE	ST ST	DELETE	1.4 CITY-			El Obarros El Addition
NAME	ROGERS, WILLIAM T	□ htreit	2.1 TITLE			☐ Change ☐ Addition
STREET ADDRESS	1300 THOMASWOOD DRIVE		2.2 NAME			
CITY-ST-ZIP	TALLAHASSEE FL 32312	•		T ADDRESS		
TITLE	AS	DELETE	2.4 CITY			Change Addition
NAME	TANERKSLEY, RAYBURN H		3.2 NAME		area.	CT CHANGE CT MODITION
STREET ADDRESS	401 CHESTNUT ST. STE 50	0		T ADDRESS		
CITY-ST-ZIP	CHATTANOOGA TN		3.4. CITY			
TITLE		DELETE	4.1 TITLE			Change Addition
NAME	•		4. 2 NAMI	:		
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREE	T ADDRESS		
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	T ADDRESS		
CITY-ST-ZIP			6.4 CITY-	ST-ZIP		1

14. Thereby 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 completion or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted of on an attachment with an address.