

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra J. Mutham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P95000009562			
1. Corporation Name PRESTIGE PROP MGT OF NAPLES, INC			
Principal Place of Business		Mailing Address	
9155 GULF SHORE DR #601% C BELDEN NAPLES FL 33963		9155 GULF SHORE DR #601 NAPLES FL 33963	
2. Principal Place of Business		2a. Mailing Address	
21		26 % C BELDEN	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27 9155 GULF SHORE DR 601	
City & State		City & State	
23		28 NAPLES FL	
Zip		Zip	
24		29 33963	
Country		Country	
25		30	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
Doris M. Brown 2295 Sandpiper St Naples, FL 33962		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		FL	
		85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508 Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE <i>Carolyn E. Belden</i>		DATE	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE		1.1 TITLE	
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
PRESIDENT/DELETABLE		2.1 TITLE	
CAROLYN E. BELDEN		2.2 NAME	
9155 GULF SHORE DR #601		2.3 STREET ADDRESS	
NAPLES FL 33963		2.4 CITY-ST-ZIP	
TREASURER DELETABLE		3.1 TITLE	
CAROLYN E. BELDEN		3.2 NAME	
9155 GULF SHORE DR #601		3.3 STREET ADDRESS	
NAPLES FL 33963		3.4 CITY-ST-ZIP	
SECRETARY DELETABLE		4.1 TITLE	
CAROLYN E. BELDEN		4.2 NAME	
9155 GULF SHORE DR #601		4.3 STREET ADDRESS	
NAPLES FL 33963		4.4 CITY-ST-ZIP	
DIRECTOR DELETABLE		5.1 TITLE	
CAROLYN E. BELDEN		5.2 NAME	
9155 GULF SHORE DR #601		5.3 STREET ADDRESS	
NAPLES FL 33963		5.4 CITY-ST-ZIP	
DELETABLE		6.1 TITLE	
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	
		900001872539	
		-06/24/96--01023--005	
		***200.00	
		5/1/92	
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 an attachment with an address.			
SIGNATURE: <i>Carolyn E. Belden</i>		Date	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	
		13/14/96 941-592-1899	

CR2E034 (12/95)