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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

Principal Place of Business

DOCUMENT #

P95000047008 (4)

GALLERY OF ESTATES, INC.

Mailing Address

FILED Apr 26 1996 8:00 am Secretary of State



1250 TAMIAI NAPLES FL	MI TRAIL. NORTH. SUITE 211 33940	1250 Tamiami Tr Naples FL 3394	1250 TAMIAMI TRAIL. NORTH, SUITE 211 NAPLES FL 33940							
		·				3. Date Incorporated or Qualified 06/16/1995	3a. Date	of La	st Report	
2. Principal Place of Business 2a. Mailing Address 21						4. FEI Number	1		Applied For	
	26 Suite, Apt. #, etc. Suite. Apt. #, etc.					5927-978-9	5		Not Applicable	
22 27 City & State City & State			C.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
23 Zip		,			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
24	Country Zip Cour 25 29 30 9. Name and Address of Current Registered Agent			try		B. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No				
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Re	gistered A	gent		
CRAIG.	Roger e		1	31	Name					
1250 TAMIAMI TRAIL, NORTH, SUITE 211 NAPLES FL 33940				32	Street Ad	Address (P.O. Box Number is Not Acceptable)				
	72 444 14		•	33						
11 Purcupat to	the gradient of Cartin			4	City		FL	85	Zip Code	
or registere	o the provisions of Sections 607.05 agent, or both, in the State of Fl	602 and 607.1508, Florida St orida. Such change was auti	atutes, the above orized by the co	ะกล เตอ	amed corp	pration submits this statement for the purpart of directors. Thereby accept the appoint	ose of char	nging i	its registered office	
* ICH LUHGH AAITI	n, and accept the obligations of, Se	ection 607.0505, Florida Stal	utes.			pration submits this statement for the purp and of directors. I hereby accept the appoint	ntment as r	egiste	red agent. I am	
SIGNATURE _	Signature, typed or printed name of registered ag	ent and title if autocable	/NOTE Registration							
12.	Stylintum, typed or printed narms of registrated agent and title if a suicable. NOTE Registered Agent signature require OFFICEIRS AND DIRECTORS 13.					DATE.	DIDEC			
TITLE	CRAIG, ROGER E			Ē	T	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
NAME	RESS 1250 TAMIAMI TRAIL, NORTH, SUITE 211				İ		L) onenç	ae [1] Yoution	
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	certify that the information supplied	with this filing is valuated to	64 CITY-:	<u> </u>	ar I			. '	V	

Let other exponential 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 appears in Block 12 or Block 13 if changed, or on an all achment with an address.

SIGNATURE: X SANATURE NO TYP

APR 11 1996 941-7261-7800