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

PROFIT CQRPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

P95000066918 (0)

MANCHESTER HOLDINGS OF NAPLES, INC.

Principal Place of Business Mailing Address					I SECTION AND STATE OF THE PROPERTY OF THE PRO	
303 RIVIERA DR., STE, 201 Naples FL 33940		303 RIVIERA DR., S' Naples fl 33940	303 RIVIERA DR., STE. 201 Naples fl 33940			
						3. Date Incorporated or Qualified 3a. Date of Last Report 08/29/1995
2. Principal Pla	ce of Business	2a. Mailing Address	. Mailing Address			4. FEI Number Applied For
21 21		26				65-0607992 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State		City & State	n '			6. Election Campaign Financing \$5.00 May Be
		28	<u></u>			Trost runo Continuolion — Abded to Pees
Zip Tin	Country	Zıp	Cou	ntry		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes
24	25 9. Name and Address of Curren	t Posistered Agent	30			10. Name and Address of New Registered Agent
	g. Name and Address of Correct	negistered Agent		81	Name	(U) Name and Address of Not Inspiratore Agent
nunn	DAMP					
	DAVID G			82	Street A	Address (P.O. Box Number is Not Acceptable)
303 RIVIERA DR., STE. 201 Naples Fl 33940			•	83		
	• • • • • • • • • • • • • • • • • • • •			84	City	85 Zin Code
						prporation submits this statement for the purpose of changing its registered office
familiar witi SIGNATURE	n, and accept the obligations of, Sect Signature typed or printed name of registered agent	ion 607.0505, Florida Statute:	S. OTE: Rugistered			board of directors. I hereby accept the appointment as registered agent. I am
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
111LE	D	☐ DELETE		1 1 TITLE		V/S/T/D ☐ Change 🙀 Addition
NAME	RUBIN, ALEX		1.2 N			
STREET ADDRESS	303 RIMERA DR., STE. 201				address	
CITY - ST - ZIP	NAPLES FL 33940	□ DELETE		IY-S	I - ZiP	D/D Change K Addition
TITLE				2 1 THLE 22 NAME		P/D
NAME	HARDY, ROBERT S 6289 BURNHAM RD		B .		*2000000	
STREET ADDRESS	NAPLES FL 33999				ADORESS	
CITY-ST-ZIP	MAPLEO I E 33999	☐ DELETE	3 1 1	ITY - S	I ZIF	Cnange Addition
TITLE NAME		Court		3 2 NAME		
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP					T - ZIP	
TITLE				1 TITLE		Change Addition
NAME		_	4.2 N	AME		
STREET ADDRESS			4.3 S	TREET	ADDRESS	·
CITY-ST-ZIP			44C	ITY - S	1 - ZIP	
TITLE		☐ DELETE	5 1 1	5 1 TITLE		Change Addition
NAME			52 N	AME		
STREET ADDRESS			538	IREET	ADDRESS	
CiTY-ST-ZiP			5.4 C	ITY-S	1-2IP	
TITLE				TITLE		☐ Change ☐ Addition
NAME.			6.2 N	AME		
STREET ADDRESS			6.3 S	TREE I	ADDRESS	
CITY - ST - ZIP			6.4 0	HY-S	1 - ZIP	
	t					440.07(0) 11.00 11.00 14.00 15.

14. Ido 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 attay hment with an address.

SIGNATURE:

4/0/96

941-263-7700

Date

Dayline Prone 1

CR2E034 (12/95)