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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

City - ST- 7iP

appears in Block 12

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 31 1997 8:00am

Secretary of State

(96/6) (96/6)

R2E034

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000072013 (2)

ISLE CAPITAL CORPORATION

534 PINELLAS BAYWAS 106 534 PINELLAS BAYWAY 106 TIERRA VERDE FL 33715-1830 TIERRA VERDE FL 33715 3. Date Incorporated or Qualified 3a. Date of Last Report 09/15/1995 03/20/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-3337389 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zıp Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name NEFF. DAVID P 534 PINELLAS BAY WAY 106 82 Street Address (P.O. Box Number is Not Acceptable) TIERRA VERDE FL 33715 83 84 City 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 (NOTE: Registered Agent signature required when reinstating) Signature Typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DPT DELETE Change Addition 1.1 TITLE THE NEFF. DAVID P NAME 1.2 NAME 534 PINELLAS BAYWAY #106 1.3 STREET ADDRESS STREET ADDRESS TIERRA VERDE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DVPS DELETE ☐ Change Addition TITLE 2.1 TITLE LINDA W NEFF NAME 22 NAME 534 PINELLAS BAYWAY 106 2.3 STREET ADDRESS STREET ADDRESS tierra verde fl 2. 4 CITY-ST-ZIP City-St-Zif DELETE Change 3.1 TITLE Addition TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY-ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ___ Addition 6.1 TITLE THUE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 adjust 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 his proporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name