PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000082851

1. Corporation Name

THE HAMLET BUILDING CORPORATION

Principal Place	e of Business	Mailing Address						
2403 TRADE CENTER WAY		2403 TRADE CENTER WAY			ì			•
SUITE 6		SUITE 6						
NAPLES FL 34109		NAPLES FL 34109			DO NOT WRITE IN THIS SPACE			
US		US			3. Date Incorporated or Qualifed			
					10/30/1995			
2. Principal Pl	ace of Business	2a. Mailing Address	·		4. FEI Number		Ap	plied For
21		26			65-0622586		No	t Applicable
Suite, Apt., #, etc.		Suite, Apt. #, etc.				\$8.75 A	dditional	
22		27			5. Certifcate of Status Desired	Ц.	Fee Re	quired
City & State		City & State		6. Election Campaign Financing		\$5.00	May Re	
		28		Trust Fund Contribution		Added t		
Zip	Country	Zip	Country		8. This corporation owes the curre	ent vear Intar		
	_ ′	├ ─ ' ┌ ─	¬ ´		Personal Property Tax.		Yes	□No
24	[25]	29 30	<u> </u>		10. Name and Address of New R			
	9. Name and Address of Current	Registered Agent	81	Name	IV. Italie allu Address of Item It	egistereu A	gont	_
PRINCED CAROL P			101	Name				
BRUGGER, CAROL R		82 Stre		Street	Address (P.O. Box Number is Not Accepta	ble)		
	FIFTH AVENUE SOUTH SUITE 20	'						
\ NAP	LES FL 34102	<i>)</i>	83					
1			_				ar Zin (
			84	City		FL	85 Zip (,ode
11 Pursuant	to the provisions of Sections 607 0502	and 607.1508. Florida Statutes.	the above	e-named	corporation submits this statement for the	purpose of c	hanging its	registered
office or re	egistered agent, or both, in the State o	f Florida. Such change was auth	norized by	the corpo	oration's board of directors. I hereby accep	t the appoint	ment as re	gistered
agent. I a	m familiar with, and accept the obligati	ons of, Section 607.0505, Florid	a Statutes	-		•		
SIGNATURE		ANOTE D			equired when reinstating)	DATE		
			13.	ır sıgnature i	ADDITIONS/CHANGES TO OF		DIRECTO	RS IN 12
12.		DELETE			ADDITIONS/CHANGES TO CIT	TOLINO / TIVE	Change	Addition
TITLE	PVD	- DELETE	1.1 TITLE				4 90	
NAME	BRUGGER, JOHN N		1.2 NAME		,			
STREET ADDRESS	600 FIFTH AVENUE SOUTH, 20	7	1.3 STREET	ADDRESS				
CITY-ST-ZIP	NAPLES FL 34102		1.4 CITY-S	T-ZIP				
TITLE	ST	□ DELETE	2.1 TITLE	1.1			Change	Addition
NAME	BRUGGER, JOHN N		2.2 NAME	_				
, STREET ADDRESS	600 FIFTH AVENUE SOUTH, 20	7	23.STREE	TADDRESS		•		
-	NAPLES FL 34102	•	2. 4 CITY-S	-			•	~ ,∶
CITY-ST-ZIP	MAPLES PE 34102	☐ DELETE	3.1 TITLE	N-ZIF	Acct Coopetany		Change	X Addition
TITLE			1		Asst. Secretary Arthur G. Davis			220
NAME			3.2 NAME		2116 Mission Drive			
STREET ADDRESS			3.3 STREET	r address	Naples, FL. 34109			
CITY-ST-ZIP			3.4. CITY-S	T-ZIP	Hupres, 11. 34103		<u> </u>	
TITLE	3 A. P. A.	DELETE 4.11					☐ Change	☐ Addition
NAME	ŽF.		4. 2 NAME					
STREET ADDRESS	•		4.3 STREE	TADDRESS				
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE				☐ Change	Addition
	•		5.2 NAME				•	
NAME				r address	<u> </u>			
STREET ADDRESS			5.4 CITY-S					
CITY-ST-ZIP		C server	6.1 TITLE	I-ZIP			Change	Addition
TITLE		☐ DELETE	1				- Change	☐ vocation
NAME			6.2 NAME					
			63 STREET	TADORESS		•		

14. I 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 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 changes or on a attachment with an address, with all other like empowered.

SIGNATURE:

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90085 035 ***150.00