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

Mailing Address

NAPLES FL 34108

2a. Mailing Address

Suite, Apl. #, etc.

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5551 RIDGEWOOD DRIVE

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Feb 27 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

(941) 394-1871

Not Applicable

3. Date Incorporated or Qualified

01/04/1996

65-0645394

5. Certificate of Status Desired

1/12/98

4. FEI Number

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600002770 (1)

BARDNEY, INC.

Principal Place of Business

5551 RIDGEWOOD DRIVE

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

NAPLES FL 34108

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City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 30 Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GOODMAN, KENNETH D 5551 RIDGEWOOD DRIVE 62 Street Address (P.O. Box Number is Not Acceptable) #405 83 NAPLES FL 34108 84 City Zip Code 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 Signiflure, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change 1 1 TITLE TITLE DE ESPINOSA, NICOLE G NAME 1.2 NAME 3033 RIVIERA DRIVE STE 106 STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL 33940 CITY+ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE GINIC, NICOLE NAME 2.2 NAME 5551 RIDGEWOOD DRIVE, #405 STREET ADDRESS 2 3 STREET ADDRESS NAPLES FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELCTO Addition TITLE 3.1 TITLE MICHALLY, VANESSA MICHALIP, VANESSA 3 2 NAME NAME 5551 RIDGEWOOD DRIVE, #405 STREET ADDRESS 3 3 STREET ADDRESS NAPLES FL 3.4. CITY - ST-ZIP CITY-ST-ZIP Change TITLE DELETE 4.1 TITLE Addition NAME MICHALUP, GABRIEL 4. 2 NAME 5551 RIDGEWOOD DR. #405 STREET ADDRESS 4.3 STREET ADDRESS NAPLES FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. Thereby 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 changed, or on an attachment with an agdress.