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May 09 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000019481 (6)

1. Corporation Name
NEOPOLITAN CORPORATION

Principal Place of Business
2640 GOLDEN GATE PARKWAY STE 206
NAPLES FL 33942

Mailing Address
2640 GOLDEN GATE PARKWAY STE 206
NAPLES FL 34105-3203



2. Principal Place of Business
21 1120 LITTLE NEOL G.

Suite, Apt. #, etc.

22 ESO

City & State

23 NAPLES FL

Zip

24 34102

Country

25

2a. Mailing Address

26 1120 LITTLE NEOL G

Suite, Apt. #, etc.

27 ESO

City & State

28 NAPLES FL

Zip

29 34102

Country

30

3. Date Incorporated or Qualified

03/01/1996

3a. Date of Last Report

4. FEI Number

65-0710935

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

ROSS, DONALD K ESQ
2640 GOLDEN GATE PARKWAY
STE. 206
NAPLES FL 33942

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D
NAME WILLIAMS, GEORGE
STREET ADDRESS 2640 GOLDEN GATE PARKWAY STE 206
CITY-ST-ZIP NAPLES FL 33942

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PREVIOUS ☒ Change ☐ Addition

1.2 NAME WILLIAMS, GEORGE

1.3 STREET ADDRESS 1254 SILVERSTAR DR

1.4 CITY-ST-ZIP NAPLES FL 34110

2.1 TITLE CFO ☐ Change ☒ Addition

2.2 NAME RICHARD D MORTHEM

2.3 STREET ADDRESS 1120 LITTLE NEOL CO

2.4 CITY-ST-ZIP NAPLES FL 34102

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

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 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 address.

SIGNATURE R D MORTHEM CEO RICHARD D MORTHEM

CR2E034 (9/96)