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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000020907**1. Corporation Name

CARPE DIEM FLORIDA INVESTMENTS, INC.

Principal Place of Business

Mailing Address

2516 SPICEBUSH LANE NAPLES FL 34105 2516 SPICEBUSH LANE NAPLES FL 34105 FILED 99 AUG 30 PM 2: 05

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DO NOT WRITE IN THIS SPACE

			3. Date incorporated or Qualified 03/06/1996	
2. Principal Place of Business	2a. Mailing Address	····	4. FEI Number	Applied For
		n Dwdwa		Not Applicable
	26 350 Kingstown Suite, Apt. #, etc.	n prive	77-0429279	\$8,75 Additional
Suite, Apt. #, etc.		T 01%-	5. Certificate of Status Desired	Fee Required
22 c/o Mr. William J. O'Meara	27 c/o Mr. Willi City & State	am J. O Me		
City & State 23 Naples, FL	Naples, FL		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation owes the current year into	
24 34102-7821 25 U.S.	29 34102-7821 34	v.s.	Personal Property Tax.	Yes No
9. Name and Address of Current R			10. Name and Address of New Registered	Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525		82 Street A Roet 83 Thir	ddress (P.O. Box Number is Not Acceptable) zel & Andress, 850 Park Short	
		84 City Napl	es FL	85 Zip Code 34103
11. Pursuant to the provisions of Sections 607.0502 at	nd 607.1508. Florida Statutes	the above named a	personal and a submitted this statement for the purpose of	changing its registered
office or registered agent, or both, in the state of F	lorida. Such change was auti	norized by the corpo	vation's board of directors. I hereby accept the appoin	ntment as registered
agent. I am familiar with, and accept the obligation	s of, Section 607.0505, Florid	a Statules.	-11	
SIGNATURE	APATE, B.	egistered Agent signature re	8/19/99 DATE	
Signature, typed contribed fieme of registered agent and 12. OFFICERS AND I		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE DPT	DELETE	1.1 TITLE	ADDITIONATION TO OTT TO ETTO	IK Change ☐ Addition
,	_ DEEL / L	1.2 NAME		.
NAME O'MEARA, WILLIAM J				
STREET ADDRESS 2516 SPICEBUSH LANE		1.3 STREET ADDRESS	350 Kingstown Drive	
CITY-ST-ZIP NAPLES FL 34105		1.4 CITY-ST-ZIP	Naples. FL 34102-7821	Colores Chieffer
TITLE	☐ DELETE	2.1 TMLE		Change Addition
NAME O'MEARA, JOYCE A		2.2 NAME		
STREET ADDRESS 2516 SPICEBUSH LANE		23 STREET ADDRESS	350 Kingstown Drive	
CITY-ST-ZIP NAPLES FL 34105		2.4 CITY-ST-ZIP	Naples, FL 34102-7821	
TITLE	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME	400002974	7348
STREET ADDRESS		3.3 STREET ADDRESS	-08/31/990	1052019
City-St-ZiP		3.4. CITY-ST-ZIP	****550.00	****550 . 00
TITLE	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
		4.3 STREET ADDRESS		
STREET ADDRESS				
CITY-ST-ZIP	☐ DELETE	4.4 CITY-\$T-ZIP 5.1 TITLE		☐ Change ☐ Addition
TITLE	☐ DELE1E	5.1 HILE 5.2 NAME		Ci transfer Ci totalori
NAME				
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		C) 04
TITLE	☐ DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		QY
STREET ADDRESS		8.3 STREET ADDRESS		•

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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 algorithms the same legal effect as if made under oath; that I am an officer or director of the comporation or the receiver or frustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 12 or Block 13 changed an attachment with an address, with all other like empowered.

SIGNATURE Device Property Design Device Property Design Proper

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