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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000041667 (2)

OLDE FLORIDA MANAGEMENT GROUP, INC.

Principal Place of Business

Mailing Address

380 SEAVIEW COURT, SUITE 101 MARCO ISLAND FL 33937

380 SEAVIEW COURT, SUITE 101 MARCO ISLAND FL 34145-2951

FILED Mar 06 1997 8:00am Secretary of State



MARCO ISLAND FL 33937		MARCO ISLAND FL 34145-2951				
					3. Date Incorporated or Qualified 05/15/1996	3a. Date of Last Report
2. Principal Place of Bus		2a. Mailing Address		Carrel	4. FEI Number	Applied For
	AVE SOUTH	26 //00 FIFTA	WE	South	65-0667106	Not Applicable
Suite Apt #, etc 22 201		27 Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State 23 NAPLES	FL	City & State 28 NAP LES	FL		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24] 34/02	Country USA	29 34102	30 Cour	"S4	8. This corporation has liability for Florida Statutes	intangible tax under s. 199.032, Yes X No
9. Name	e and Address of Current	t Registered Agent			10. Name and Address of New Re	gistered Agent
AMERILAWYER CHARTERED				81 Name CASEY WOLFF, ESQ		
343 ALMERIA AVENUE					ess (P.O. Box Number is Not Acceptab	ole) a PA
CORAL GABLE	S FL 33134		ļ.		FICH STACK - MOC	FF TIAL
			ľ	3 2150	Goodlerie R	d. , 6 [™] fl.∞ r.
				City NAP	LES	FL 85 Zun Code
11. Pursuant to the provi office or registered a	sions of Sections 607.0502 gent, or both, in the State	2 and 607.1508, Florida Sta of Florida. Such change wa	tutes, the ab	ove-named corp by the corporati	oration submits this statement for the poon's board of directors. I hereby acception	ourpose of changing its registered of the appointment as registered
SIGNATURE	viiri, and accept the obliga	L CASE >	l wout	4		<u>'</u>
Silvinalini	OFFICERS AND		OTE Registered	Agent signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFICE	DAYE
12.	OFFICENS AND	DELETE	1.1 101	E N	187 D	Change Addition
NAME SCOTT, WAYNE ALLEN			1.2 NA	, and a second		
STREET ADDRESS 380 SEAVIEW COURT, SUITE 101				EET ADDRESS		
CITY-ST-ZIP MARCO ISLAND FL 33937				Y-ST-ZIP		34145
TITLE		☐ DELETE	2.1 TITI		D	☐ Change 🚨 Addition
NAME			2.2 NA	ME PA	UL E. SOUTA O SAMAR AVE	
STREET ADDRESS			2.3 STR	EET ADDRESS 40	G SAMAR AVE	
CHTY-ST-ZIP			2. 4 CIT	Y-ST-ZIP	APUS, FL 3411,3	
TITLE		☐ DELETE	3.1 TITI	.E	•	Change Addition
NAME			3.2 NAF	AE		
STREET ADDRESS				EET ADDRESS		
CITY - S1 - ZIP		DELETE		Y-ST-ZIP		Change Addition
THILE		בין מבנכוב	4.1 (0)			Change Addition
NAME			4. 2 NA	1		
STREET ADDRESS				EET ADDRESS		
CITY+ST+ZIP TITLE		DELETE	4.4 CII 5.1 TITI	Y-ST-ZIP E	A. A	Change Addition
NAME			5.2 NA			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP				Y-\$T-ZIP		
TITLE		DELETE	6.1 TITI			Change Addition
NAME			6.2 NA	AE	•	
STREEL ADDRESS			6.3 STF	EET ADDRESS		
CITY-ST-ZIP			6.4 CIT	Y-\$1-ZIP		
	at the information supplied	d with this filing does not qu	alify for the e	exemption stated	in Section 119.07(3)(i), Florida Statute	s. I further certify that the

In a releasy certify the shormation supplied warring the tree 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 ecciver 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 one attachment with an address.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/81/97

491-403-58