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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STAT

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000042362 (9)

NAPLES HEALTHCARE GROUP, INC.

## FILED Apr 23 1997 8:00am Secretary of State

|--|

Principal Place of Business			Mailing Address									
205 NORTH COLLIER BLVD.			205 NORTH COLLIER BLVD.									
SUITE 234			SUITE 234									
MARCO ISLAND FL 33145			MARCO ISLAND FL 34145-3034					. Date Incorpora	ted or Qualified	I So Do	te of Last R	oport
		<i>-</i>						05/17/1996	nied or Quanned	Sa. Da	ie oi Lastin	eport
2. Principal Place		P13	Mailing Address	: ^ L	D 0		4.	. FEI Number			<del></del>	plied For
21 950 N Collier Blvd			26 950 N Collier Blvd				65-0675474					t Applicable
Sulte, Apt. #, et		Suite, Apt. #, etc.				5.	. Certificate of S	tatus Desired		\$8.75		
22 Suite #305			27 Suite #305								Fee Re	equired
City & State	. P d . T P	City & State 28 Marco Island, Fl			+0		6.	. Election Camp			<b>\$5.00</b> May Be	
	sland, Fl.	58		na,				Trust Fund Cor				to Fees
Zip	Country	1	Zip		Country		8.		n has liability for		-	199.032,
24 34145	25 Collier Name and Address of Curren	29	34145	30	Coll	rer		Florida Statute	dress of New Re		No	
	<del></del>	it itegis	iteleo Agent		81	Name		, Name and Au	uless of New Ne	gistered A	(gent	
	, MICHAEL B				*'	TARRITIO						
	ITH COLLIER BLVD.				82	Street	Address (I	P.O. Box Numbe	r is Not Acceptat	ole)		
SUITE 23					83							
MARCO	ISLAND FL 34145				63							
					84	City					85 Zip	Code
					<u>,</u> .	L				FL		
11. Pursuant to the	e provisions of Sections 607.050 ered agent, or both, in the State	2 and 6 of Horic	07.1508, Florida State da. Such change was	utes, t : authi	he abovi orized by	e-named / the con	t corporation's	on submits this s board of directo	tatement for the p rs. I bereby accei	burpose of of the appr	changing it pintment as	s registered ) registered
agent. I am fai	miliar with, and accept the obliga	ations of	f, Section 607.0505, F	lorida	Statute	3.				,-, ,		
SIGNATURE								<u> </u>			.,	
Signal 12.	ture, typed or printed name of registered age OFFICERS AND		****	) <sup>†</sup> † Fire	· ·	ะที่ รเกาสโนก	e required who		ANICES TO OFFI	DATE	DIDECTOR	O IN 10
TITLE D	OFFICERS AIN	DIME	DELETE		13. 1.1 ILE		1	ADDITIONS/CH	ANGES TO OFFIC		Change	Addition
1 ' 1 -	QUET, MICHAEL B		ב אוניון	ı			}				MC1 Change	Addition
		994		ı	1.2 I NME		050 1	I Callion	Blvd, #3	ΛE		
Company AMADON ISLAND SLIGHTE									Fl. 3414			i
CITY-ST-ZIP MA	INCO ISENIAD PE 34143	<i>-</i>	DELETE			1 - ZIP	Marco	istana,	F. 2414.	2	Change	Addition
1			[ ] Much		21 LE						Change	Magailon
NAME				J	22 MF							
STREET ADDRESS						ADDRESS						ľ
CITY-ST-ZIP			O pro exe			S1 - 71P	<del></del>				<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TITLE			☐ DELETE	]	31		)				Change	Addition
NAME				Į	3.2 ME							
STREET ADDRESS				1		ADDRESS						
CITY-ST-ZIP			D prieze		3.	S1 - ZIÉ	<del> </del>		····		<u> </u>	1 1 2 2
TITLE			L) DELETE	1	4.						L Change	Addition
NAME				- 1	4.							
STREET ADDRESS						ADDRESS	1					
CITY-ST-ZIP						T-ZIP	ļ					
TITLE			DELETE		5 1 E						Change	Addition
NAME				j	5.2 ME		1					
STREET ADDRESS				1	5.3 REE1	ADDRESS						
CITY-ST-ZIP					5.4 'Y- S	1 - 7IP						
TITLE			DELETE	,	61 ILE		1				☐ Change	☐ Addition
NAME					6.2 LAME		1					
STREET ADDRESS					6.3 STREET	ADDRESS						
CITY-ST-ZIP					6 4 CHY - 5	1 - 7(P	<u> </u>	<del></del>				
4												

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 offect 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 of changed, or on an attachment with an address.

SIGNATURE:

Mehand Ost MK

MICHAEL DUNDET

4/15/91 941 389 9777