

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

FILED

Apr 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000053498 (7)

1. Corporation Name
PETERSON ENTERPRISES, INC.



Principal Place of Business 839 100TH AVE NORTH NAPLES FL 33963	Mailing Address 839 100TH AVE NORTH NAPLES FL 33963
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 13200 Southampton Dr. Suite, Apt. #, etc. 22 City & State 23 Bonita Spgs FL Zip Country 24 34135 25 USA		2a. Mailing Address 26 13200 Southampton Dr. Suite, Apt. #, etc. 27 City & State 28 Bonita Spgs FL Zip Country 29 34135 30 USA		3. Date Incorporated or Qualified 06/21/1996 4. FEI Number 59-3439189 APPLIED FOR 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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9. Name and Address of Current Registered Agent

**PETERSON, ROGER B
839 100TH AVE NORTH
NAPLES FL 33963**

10. Name and Address of New Registered Agent

81 Name Peterson, Roger B.	82 Street Address (P.O. Box Number is Not Acceptable) 13200 Southampton Dr.
83	84 City Bonita Spgs FL
85 Zip Code 34135	

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 *Roger B. Peterson* **President** **4/13/98**
Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETERSON, ROGER B	1.2 NAME	
STREET ADDRESS	839 100TH AVE NORTH	1.3 STREET ADDRESS	13200 Southampton Dr.
CITY-ST-ZIP	NAPLES FL 33963	1.4 CITY-ST-ZIP	Bonita Spgs., FL 34135
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETERSON, DEBORAH A	2.2 NAME	
STREET ADDRESS	839 100TH AVE NORTH	2.3 STREET ADDRESS	13200 Southampton Dr.
CITY-ST-ZIP	NAPLES FL 33963	2.4 CITY-ST-ZIP	Bonita Spgs., FL 34135
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	Donald L. Fowell
STREET ADDRESS		3.3 STREET ADDRESS	125 Caribbean Road
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Naples, FL 34108
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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: *Roger B. Peterson* **2/10/98** **911-1105-1953**

CR2E034 (10/97)