

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

FILED
Mar 16, 1999 8:00 am
Secretary of State

03-16-1999 90147 002 ***158.75

DOCUMENT # P96000055259

1. Corporation Name

ANTIBE OF NAPLES, INC.

Principal Place of Business

5551 RIDGEWOOD DRIVE
SUITE 203
NAPLES FL 33963

Mailing Address

5551 RIDGEWOOD DRIVE
SUITE 203
NAPLES FL 33963

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/28/1996

4. FEI Number

65-0684283

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.



Yes



No

9. Name and Address of Current Registered Agent

ATHAN, G H
5551 RIDGEWOOD DRIVE
SUITE 501
NAPLES FL 34108

10. Name and Address of New Registered Agent

81 Name

Kenneth D. Goodman

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

3838 Tamiami Tr. N., Suite 300

83

Suite 300

84 City

Naples

FL

85 Zip Code

34103

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 agent 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

Kenneth D. Goodman

3/19/99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☒ DELETE

TITLE D
NAME GRIFFIN, GERALD F
STREET ADDRESS 5551 RIDGEWOOD DRIVE STE 203
CITY-ST-ZIP NAPLES FL 33963

TITLE D
NAME CORACE, RICHARD F
STREET ADDRESS 5551 RIDGEWOOD DRIVE STE 203
CITY-ST-ZIP NAPLES FL 33963

TITLE D
NAME SHARPE, KEITH A
STREET ADDRESS 5551 RIDGEWOOD DRIVE STE 203
CITY-ST-ZIP NAPLES FL 33963

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PST

☒ Change

☐ Addition

1.2 NAME

Kenneth D. Goodman

1.3 STREET ADDRESS

3838 Tamiami Tr. N., Suite 300

1.4 CITY-ST-ZIP

Naples, FL 34103

2.1 TITLE

D

☒ Change

☐ Addition

2.2 NAME

E.A. Smith

2.3 STREET ADDRESS

356 Cromwell Court

2.4 CITY-ST-ZIP

Naples, FL 34108

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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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 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, with all other like empowered.

SIGNATURE:

Kenneth D. Goodman

3/19/99

941-403-3000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)