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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000087921 (8)

FILED Apr 28 1997 8:00am Secretary of State

NORTH PRESERVE DEVELOPMENT CORPORATION Principal Place of Business Mailing Address 7200 DAVIS BLVD. 7200 DAVIS BLVD. NAPLES FL 33962 NAPLES FL 34104-5303							
				3. Date incorporated or Qualified 10/22/1996	3a. Da	te of Last R	aport
2. Principal Place of Business	2a. Mailing Address	·		4. FEI Number	<u></u>	Ar	oplied For
21	26)			59-340724	<u> </u>		ot Applicable
Suite, Apt #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired
City & State	City & State	· · · · · · · · · · · · · · · · · · ·	·····, ///	6. Election Campaign Financing			May Be
Zip Country	28 Zip	Cour	ntru	Trust Fund Contribution			to Fees
24 25 25	29	30	iti y	8. This corporation has liability for i	ntangible] Yes [. 199,032,
9. Name and Address of Curr				10. Name and Address of New Re			
SIESKY, JAMES H			81 Name				
1000 TAMIAMI TRAIL NORTH SUITE 201 NAPLES FL 34102		ł	82 Street Add	dress (P.O. Box Number is Not Acceptab	le)		
		- [·	
			83				
		Ī	84 City		FL	85 Zip	Code
Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Stalagent I am familiar with, and accept the oblining Signals: 514-d or printed name of registered.	agent and title if applicable (N	OTE: Registered		uired when reinstaling) ADDITIONS/CHANGES TO OFFIC	DATE		
12. OFFICERS A	ND DIRECTORS DELETE	13.	if T	ADDITIONS/CHANGES TO OFFIC	ENS ANL	Change	Addition
NAME HUBSCHMAN, SAMUEL	1	1.2 NA	ŀ				
STREET ADDRESS 7200 DAVIS BLVD.		1.3 ST	REET ADDRESS				
OHY-ST-ZIP NAPLES FL 33962		1.4 0/1	Y-ST-ZIP				
THE D	C DELETE	2.1 1(1	1			Change	Addition Addition
HUBSCHMAN, HARRISON 7200 DAVIS BLVD.		2.2 NA	ME REET ADDRESS				
City ST-ZiP NAPLES FL 33962			TY-ST-ZIP				
DILLE D	DELETE	3.1 TIT				Change	Addition
NAME HUBSCHMAN, ALBERT		3.2 NA	ME				
STREET ADDRESS 7200 DAVIS BLVD.		3.3 ST	HEET ADDRESS				
City-SI-ZiP NAPLES FL 33962	DELETE	3.4. CI 4.1 TIT	IY-ST-ZIP			Change	Addition
NAME		4. 2 N	F			CT Outligo	La reconton
STREET ADDRESS			REET ADORESS				
CITY-ST-ZIP			Y-ST-ZIP				
11"16	DELETE	5.1 TIT	LE			Change	Addition
NAME		5.2 NA					
STREET ADDRESS			REET ADDRESS				
CITY - ST - ZIP	DELETE		Y-ST-ZIP			Change	Addition
T.TLE	ייין סניניונ	6.1 7)T 6.2 NA	_			FT CHENIAG	TT MUNICOLI
NAME STREET ADDRESS			REET ADDRESS				
		0.5 311	iter uphires				
CiTY - ST - ZIP		6400	Y-ST-ZIP				

140. To incremy certify that the information supplied with this tring does not quality 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 attaching with an address.

SIGNATURE:

SIGNATURE AND TYP

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