

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

FILED
May 08 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000001039 (1)

1. Corporation Name

JOHN ALDEN HOMES OF NAPLES, INC.



Principal Place of Business

655 FOUNTAINHEAD LANE
NAPLES FL 34103

Mailing Address

655 FOUNTAINHEAD LANE
NAPLES FL 34103

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/06/1997

4. FEI Number

65-0725294

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 or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

FILED

2. Principal Place of Business

21 4601 Enterprise Ave

2a. Mailing Address

26 4601 Enterprise Ave

Suite, Apt. #, etc.

22 #3

Suite, Apt. #, etc.

27 #3

City & State

23 Naples FL

City & State

28 Naples FL

Zip

24 34104

Country

25 Collier

Zip

29 34104

Country

30 Collier

9. Name and Address of Current Registered Agent

UCC FILING & SEARCH SERVICES, INC.
528 EAST PARK AVE.
SUITE 200
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

CHRISTOPHER LOMBARDO, ESQ.

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

801 LAUREL OAK BLVD.

83

SUITE 710

84

CITY NAPLES

FL

85

Zip Code 34108

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

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

(NOTE: Registered Agent signature required when reinstalling)

4/30/98

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PSTD
DAUGHERTY, LYNN A
STREET ADDRESS 655 FOUNTAINHEAD LANE
CITY-ST-ZIP NAPLES FL 34103

TITLE ☐ DELETE

NAME VD
DAUGHERTY, EVELYN A
STREET ADDRESS 655 FOUNTAINHEAD LANE
CITY-ST-ZIP NAPLES FL 34103

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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

[Signature]

4/29/98

CR2E034 (10/97)