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PROFIT CORPORATION ANNUAL REPORT 1999

DOCUMENT #

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90033 046 ***150.00

)	. 	

DAVID	summerton designs, inc).					
Principal Plac	ce of Business	Mailing Address				eer aa ree r aar e k aar e	erier ein ibei
639 110TH AV		975 IMPERIAL GOLF COURS	SE BLVD) .			
NAPLES FL 34108 NAPLES FL 34110							
US US				DO NOT WRITE IN TH	IIS SPACE		
					3. Date Incorporated or Qualifed		
					01/27/1997		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number		olied For
21		26			59-3427074		Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A Fee Red	
22 City & Sta	ta .	City & State			- Clarific Consider Financia		
23		28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 (Added to	
Zip	Country	Zip	Cou	intry	8. This corporation owes the current year		
24	25	——, ` -	30	,	Personal Property Tax.		□No
	9. Name and Address of Curren			Ţ	10. Name and Address of New Registers		
				81 Name			
FAGA, ANTONIO ESQ				82 Street Add	ress (P.O. Box Number is Not Acceptable)		
375 12TH AVE., SOUTH			Olipet Addi	(1.0. DOX (Millipol la Mot Acceptable)			
NAF	PLES FL 34102			83			
				84 Chy		. 85 Zip C	odo.
				or My	<u> </u>	L 183 Zip C	ode
office or agent, I	an familiar with, and accept the obliga	TIONS OF SECTION 607.0505, NOT	ida Stati	bove-named corporation these Agent signature require	b Ation submits this statement for the purpose on a popular of directors. I hereby accept the applications of the purpose of t	oointment as rec	istered 4
12.		ID DIRECTORS	13.	Age it signature require	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 111	TLE.		☐ Change	Addition
NAME	SUMMERTON, DAVID		1.2 NA				-
STREET ADDRESS 975 IMPERIAL GOLF COURSE BLVD.		1 3 ST	REET ADDRESS			ļ	
CITY-ST-ZIP	NAPLES FL 34110		1.4 CI	TY-ST-ZIP			
TITLE		☐ DELETE	2.1 TIT			Change	Addition
NAME			2.2 NA	ME			
STREET ADORESS	S		2.3 ST	REET ADDRESS			Í
CITY+ST-ZIP	\		2, 4 C	ITY-ST-ZIP			
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STREET ADDRESS			3.2 NA	ľ		☐ Change	
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TITLE	5		3.3 ST	AME		☐ Change	
NAME	5	☐ DELETE	3.3 ST	AME TREET ADORESS ITY-ST-ZIP		☐ Change	Addition
	3	☐ DELETE	3.3 ST 3.4. CI	AME TREET ADDRESS ITY-ST-ZIP TLE			
STREET ADDRESS		☐ DELETE	3.3 ST 3.4. CI 4.1 TH 4.2 N.	AME TREET ADDRESS ITY-ST-ZIP TLE			
CITY-ST-ZIP		☐ DELETE	3.3 ST 3.4, Cl 4.1 Th 4.2 NJ 4.3 ST	AME TREET ADDRESS ITY-ST-ZIP TLE			
		☐ DELETE ☐ DELETE	3.3 ST 3.4, Cl 4.1 Th 4.2 NJ 4.3 ST	AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP			
CITY-ST-ZIP			3.3 ST 3.4. CI 4.1 Th 4.2 N. 4.3 ST 4.4 CI	AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE		☐ Change	☐ Addition
CITY-ST-ZIP TITLE	3		3.3 ST 3.4 CI 4.1 TR 4.2 NA 4.3 ST 4.4 CI 5.1 TR 5.2 NA	AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE		☐ Change	☐ Addition
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CITY-ST-ZIP TITLE NAME STREET ADDRESS	3		3.3 ST 3.4. CI 4.1 TR 4.2 NJ 4.3 ST 4.4 CI 5.1 TR 5.2 NA 5.3 ST	AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP		☐ Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	3	[] DELETE	3.3 ST 3.4. CI 4.1 TM 4.2 NJ 4.3 ST 4.4 CI 5.1 TM 5.2 NA 5.3 ST 5.4 CI	AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE MME TREET ADDRESS TY-ST-ZIP TREET ADDRESS TY-ST-ZIP TREET ADDRESS TY-ST-ZIP		☐ Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		[] DELETE	3.3 ST 3.4. CI 4.1 TH 4.2 NA 4.3 ST 4.4 CI 5.1 TH 5.2 NA 5.3 ST 5.4 CI 6.1 TH 6.2 NA	AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE MME TREET ADDRESS TY-ST-ZIP TREET ADDRESS TY-ST-ZIP TREET ADDRESS TY-ST-ZIP		☐ Change	☐ Addition

does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information out is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an tee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in an address, with all other like enlowered. 14. I hereby certify that the information suindicated on this annual report or sup officer or director of the co-poration of Block 12 or Block 13 if changed, or o

SIGNATURE: