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Apr 21 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 # P97000009811 (5)

1. Corporation Name

RONTO DEVELOPMENTS WEST NAPLES, INC.



Principal Place of Business

Mailing Address

277 NORTH COLLIER BLVD. 2ND FLOOR
MARCO ISLAND FL 33937

277 NORTH COLLIER BLVD. 2ND FLOOR
MARCO ISLAND FL 33937

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 3185 Horseshoe Dr. S

2a. Mailing Address

26 3185 Horseshoe Dr. S

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 First Floor

27 First Floor

City & State

City & State

23 Naples, FL

28 Naples, FL

Zip

Zip

Country

Country

24 34104

25 USA

29 34104

30 USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

01/31/1997

4. FEI Number

65-0738971

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

10. Name and Address of New Registered Agent

SOLOMON, A. JACK
277 NORTH COLLIER BLVD. 2ND FLOOR
MARCO ISLAND FL 33937

81 Name

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

3185 Horseshoe Drive South

83

First Floor

84

Naples

FL

85

Zip Code
34104

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP ☐ DELETE

NAME SOLOMON, A. Jack

STREET ADDRESS 3185 Horseshoe Drive South

CITY-ST-ZIP Naples, FL 34104

TITLE VP ☐ DELETE

NAME LESPERANCE, ANGELA

STREET ADDRESS 3185 Horseshoe Drive South

CITY-ST-ZIP Naples, FL 34104

TITLE CT VP ☐ DELETE

NAME TAYLOR, MARK S.

STREET ADDRESS 3185 Horseshoe Drive South

CITY-ST-ZIP Naples, FL 34104

TITLE ST ☐ DELETE

NAME WELKS, KAREN E.

STREET ADDRESS 3185 Horseshoe Drive South

CITY-ST-ZIP Naples, FL 34104

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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

14. I hereby certify that the information submitted 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 which address.

SIGNATURE

CR2E034 (10/97)