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FILED  
Feb 16 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 # P97000025072 (4)

1. Corporation Name

OPUS ENTERPRISES, INC.

Principal Place of Business

Mailing Address

3875 MIDSHORE DRIVE  
NAPLES FL 34109

3875 MIDSHORE DRIVE  
NAPLES FL 34109

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/19/1997

4. FEI Number

59-3448727

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

2. Principal Place of Business

21 21401 S. TAMIAM TRAIL

Suite, Apt. #, etc.

22

City & State

23 ESTERO FL

Zip

24 33928

Country

25 COLLIER

26

City & State

27

Suite, Apt. #, etc.

28

City & State

29

Suite, Apt. #, etc.

30

City & State

31

Suite, Apt. #, etc.

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City & State

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Suite, Apt. #, etc.

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City & State

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Suite, Apt. #, etc.

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City & State

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Suite, Apt. #, etc.

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City & State

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Suite, Apt. #, etc.

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City & State

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Suite, Apt. #, etc.

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City & State

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Suite, Apt. #, etc.

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City & State

45

Suite, Apt. #, etc.

46

City & State

9. Name and Address of Current Registered Agent

PAULICH, JOHN III, ESQ  
2150 GOODLETTE ROAD  
6TH FLOOR  
NAPLES FL 34102

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

TITLE PRESIDENT, V.P., SECY, TREAS ☐ DELETE

NAME JOHN W. COLLINS

STREET ADDRESS 3875 MIDSHORE DR

CITY-ST-ZIP NAPLES FL 34109

TITLE ☐ DELETE

NAME BARBARA GOETT

STREET ADDRESS 3175 LOWBANK DR

CITY-ST-ZIP NAPLES, FL 34109

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

John W. Collins

2-9-98

041-594-0415

CR2E034 (10/97)