

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000027073

1. Corporation Name

NEOPOLITAN TWO CORPORATION

Principal Place of Business

2640 GOLDEN GATE PARKWAY, SUITE 206
NAPLES FL 34105

Mailing Address

2640 GOLDEN GATE PARKWAY, SUITE 206
NAPLES FL 34105

2. Principal Place of Business

2a. Mailing Address

21 1120 LITTLE NEAL CT
Suite, Apt. #, etc.

26 P.O. Box 185
Suite, Apt. #, etc.

22 1250
City & State

27
City & State

23 NAPLES FL
Zip Country

28 HANOVER MA
Zip Country

24 34102 25 USA

29 02339 30 USA

9. Name and Address of Current Registered Agent

ROSS, DONALD K JR.
2640 GOLDEN GATE PARKWAY, SUITE 206
NAPLES FL 34105

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/19/1997

4. FEI Number

APPLIED FOR 58-2399404

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 the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

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 D
NAME WILLIAMS, GEORGE
STREET ADDRESS 2640 GOLDEN GATE PARKWAY, SUITE 206
CITY-ST-ZIP NAPLES FL 34105

☐ DELETE

TITLE T
NAME MATTHEWS, RICHARD D
STREET ADDRESS 1120 LITTLE NEAL CT, F-250
CITY-ST-ZIP NAPLES FL 34102

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/16/99

Date

941 786 7891

Daytime Phone #

CR2E034 (1/98)