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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000032147 (5)

NAPIES AREA VACATION RENTALS, INC.

3255 TAMIAMI TRAIL NORTH

NAPLES FL 34103

IIIAI EEO A	HEN TOOMION HEN	IALO, IIIO			
Principal Place of Business		Mailing Address			
3255 TAMIAMI TRI NAPLES FL 34103		3255 TAMIAMI TRAIL NORTH NAPLES FL 34103		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 04/09/1997	
2. Principal Place of Business 21		2a. Mailing Address 26		4. FEI Number 59-3442445	Applied Fo
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additions Fee Required
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Ζ(p)	Country 30	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible X Yes \( \square \text{No} \)
9	Name and Address of Co	rrent Registered Agent		10. Name and Address of New Register	red Agent
WOOD	DUIL ID		81 Name		

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.

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SIGNATURE	Signature, typed or profed name of registered against and life V applicable (NO)	Registered Agent signature rec	quired when reinstating) DATE
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	Phillip R. Wood	1.2 NAME	
STREET ADDRESS	3255 Tamiami Trail N.	1.3 STREET ADDRESS	
CITY-ST-ZIP	Naples, FL 34103	1.4 CITY-ST-ZIP	
TITLE	S DELETE	2.1 TITLE	Change Addition
NAME	Dorothy D. Babcock	2.2 NAME	
STREET ADDRESS	3255 Tamiami Trail N.	2 3 STREET ADORESS	
CITY-ST-ZIP	Naples, FL 34103	2 4 CITY-ST-ZIP	
TITLE	T DELETE	3.1 TITLE	Change Addition
NAME	Larry Tomsic	3.2 NAME	
STREET ADDRESS	3255 Tamiami Trail N.	3.3 STREET ADDRESS	
CITY-ST-ZIP	Naples, FL 34103	3.4. CITY-ST-ZIP	
TITLE	DELETE	4.1 TITLE	Change Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY - ST - ZIP	
TITLE	☐ DELETE	5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY - ST - ZIP	
TITLE	DELETE	6.1 TITLE	Change Addition
NAME		6.2 NAME	•
STREET ADDRESS		6.3 STREET ADDRESS	

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 eath; 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 addition.

SIGNATURE:

3/2/98

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

941-261-6622

**FILED** 

Mar 12 1998 8:00am

Secretary of State

Applied For Not Applicable 8.75 Additional Fee Required \$5.00 May Be Added to Fees