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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE

NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 06 1998 8:00am

Secretary of State

Change

Change

Change

Addition

Addition

Addition

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000047059 (5)

BOM BAY DEVELOPERS, INC.

Principal Plac	e of Business	Mailing Address				
103 JUMENTO	CAY	103 JUMENTO CAY				
BONITA SPRI	NG\$ FL 33923	BONITA SPRINGS FL 3	13923	DO NOT WRITE	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified		
				05/28/1997		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0759841	Not Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	9	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24 34134		Z _i ρ [29] 34134	Country 30	This corporation owes or has pain Personal Property Tax due June	30. 🗶 Yes 🗌 No	
	9. Name and Address of Cur	rent Registered Agent	81 Na	10. Name and Address of New Reg	istered Agent	
1201 HAYS STREET TALLAHASSEE FL 32301-2525			82 Str 83	eet Address (P.O. Box Number is Not Acceptable 103 Jumento Cay Ln		
				y Bonita Springs med corporation submits this statement for the pu		
office or n agent. I a SiGNATURE	to the provisions of Soctions 607.1 goistered agent, or both, in the St m tampfur with, and toccept the of Sonatore, spira or pour a natural trajectoric Sonatore, spira or pour a natural trajectoric	ale of Florida, Such change wa highlightens of Section 607,0505,	s authorized by the Florida Statutes	corporation's board of directors. I hereby accept	urpose of changing its registered the appointment as registered 27-98 DATE	
12.	OFFICERS	AND DIFF CLORS	13.	ADDITIONS/CHANGES TO OFFICE		
TITLE	D	☐ DELETE	1.1 TITLE	D,P,T	Change 🔲 Addition	
NAME	MOTT, ROBERT L		1.2 NAME			
STREET ADDRESS	103 JUMENTO CAY		1.3 STREET ADDR	FSS .		
CITY-ST-ZIP	BONITA SPRINGS FL 3392		1.4 CITY-ST-ZIP		34134	
TITLE	D	☐ DELETE	21 TITLE	D,S	Change 🗀 Addition	
NAME	MOTT, DOROTHY		2.2 NAMF			
STREET ADDRESS	103 JUMENTO CAY		2.3 STREET ADDR	ESS (
CITY-ST-ZIP	BONITA SPRINGS FL 3392		2. 4 CITY - ST - ZIP		34134	
TITLE		☐ OFLETE	3.1 TITLE		Change Addition	
NAME (2.0 MANAG	ŀ		

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 address.

3 3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY - ST - ZIP

3.4 CITY-ST-7IP

4.1 TITLE 4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

SIGNATURE: ROBERT L MOTT K-27-98 941.992.999