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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Apr 13 1998 8:00am

Secretary of State

Mulao

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P97000047826 (7)

NAPLES COURT REPORTING, INC.

(					
Principal Plac	e of Business	Mailing Address	•	a embrinder tem imite somet antit anbite anrit dut	
3121 SANTA DARBARA BLVD		3122 SANTA BARBARA BLVD			
APT NAPI POST 20000		APT 1		DO NOT WRITE IN T	HIS SPACE
NAPLES TU 33999		DATPLES IL 33999		3. Date Incorporated or Qualified	
•	`	\		05/27/1997	
2. Principal P	lace of Business	2a. Mailing Address	1 10	4. FEI Number	Applied For
21 2272 air port Road 26 2272 a			irport Road	4 65-075697	Not Applicable
Suife, Apt. #, etc.		200	5. Certificate of Status Desired	\$8.75 Additional	
22 Surte 307 27 Surte			507		Fee Required
City & State City & State 28 NAOLES . FL 34112 28 NAOLES . FL			1 2	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country Zip			Country.	This corporation owes or has paid the	
			30 (1.5)	Personal Property Tax due June 30.	Yes 🔲 No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registe	red Agent
HOLTON, LISA A/ 81 Name Tanice Rita maline					
312	22 SANTA BARBARA BLVD		82 Street Addr	ress (P.O. Box Number is Not Acceptable)	776 11
APT 1			22	12 airport Koa	a South
NAPCES N. 33999			83 647	10, 2/19	
	`		84 City // 1	2010	85 Zip Code
44.6		10074100 5. 11. 61. 1	1 ///		FL   341/2
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. Lami familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE	Signature 44.1 or prior name of repistered agent	I I accorded to the state of th	Registered Agent signature requir	red when reinstating)	7/10
12.	OFFICERS AND	<del>``</del>	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	President	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	1 · · · · · · · · · · · · · · · · · · ·	Maliae	1.2 NAME		
STREET ADDRESS	2022 Accort	Road South	13 STHEET ADDRESS		
CITY - S1 - ZIP	Naples Floriby	34112	1.4 CITY-ST-ZIP		
TITLE	secretary, Treasu	irer Delete	2.1 TITLE		Change L Addition
NAME	LISA A. Holton		2.2 NAME		
STREET ADDRESS	22/72 amount Roc	ad South	2 3 STREET ADDRESS		
CITY-ST-ZIP TITLE	Maples +1001014	34(1Q) DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME		btitle	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLÉ	<del></del>	DELETE	4.1 TITLE	······································	Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		1
CITY-ST-ZIP	_		4.4 CHTY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-24P		<del> -</del>	5.4 CITY - ST - ZIP		
TITLE		L.) DELETE	6.1 TITL€		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	portion that the information equation is	this films does not avail. to	6.4 CITY-ST-ZIP	Section 119 07/3Vi) Florida Statutas 15 otto	or cortify that the information
14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statules. 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.					