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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000055605

PENINSULA PROPERTY SERVICES, INC.

Principal Place	e of Business	Mailing Address				I IDDIIDON IND SENIS KODIN BORN BORN BONN BONN DINON BIND BINN BONN BONN HOW
4200 25TH AVE. SW 4200 25TH AVE. SW						
NAPLES FL 34116 NAPLES FL 34116						.DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed
						06/23/1997
2 Principal Pl	tace of Business	2a. Mailing Address				4. FEI Number Applied For
21	ace of business	26	•			59-3456565 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc	C			5. Certificate of Status Desired S8.75 Additional
22		27				5. Certificate of Status Desired
City & State	е	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip		ountry		8. This corporation owes the current year Intangible Personal Property Tax. Yes
24	25	29	30			Personal Property Tax. Li Yes Li No. 10. Name and Address of New Registered Agent
	9. Name and Address of Curre	ent Registered Agent		81	Name	IV. Name and Address of New Rogistered Agent
SMIT	TH, RUSSELL					
4200 25TH AVE. SW				82	Street Ad	ddress (P.O. Box Number is Not Acceptable)
	LES FL 34116			83		
						lan 7:- Codo
				84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida	Statutes, the	above	-named co	orporation submits this statement for the purpose of changing its registered
office or n	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change	was authoriz	zea by :	tne corpor	ation's board of directors. I hereby accept the appointment as registered
	in laminal with, and accept the oblig	20010 01, 0000011 001.000	.0, 1 10,,000 0.			,
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable	(NOTE: Registe	red Agen	t signature req	quired when reinstating) DATE
12.		ND DIRECTORS	1	2		
TITLE				3.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	P	☐ DELE		1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
	SMITH, RUSSELL		1.1 1.1	1 TITLE 2 NAME		
STREET ADDRESS	SMITH, RUSSELL 4200 25TH AVE. SW		1.1 1.1	1 TITLE 2 NAME	ADDRESS	
STREET ADDRESS CITY-ST-ZIP	SMITH, RUSSELL 4200 25TH AVE. SW NAPLES FL 34116	☐ DELE	1.5 1.5 1.6 1.6	1 TITLE 2 NAME 3 STREET 4 CITY-ST		☐ Change ☐ Addition
	SMITH, RUSSELL 4200 25TH AVE. SW NAPLES FL 34116 V		12 1.1 1.3 1.4 1.4 1.4 1.4 1.4 1.4 1.4 1.4 1.4 1.4	1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE		
CITY-ST-ZIP	SMITH, RUSSELL 4200 25TH AVE. SW NAPLES FL 34116 V SMITH, KIMBERLY	☐ DELE	1.1 1.3 1.4 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5	1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 2 NAME	r-ZiP	☐ Change ☐ Addition
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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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP