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

FILED Feb 13 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** P97000056705 (1) ISLAND COAST DEVELOPMENT, INC. Principal Place of Business Mailing Address 718 WILLOWHEAD DR. 716 WILLOWHEAD DR. NAPLES FL 34103 NAPLES FL 34103 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/27/1997 2. Principal Place of Business 2s. Mailing Addres Applied For 26 1106 Not Applicable \$8.75 Additional Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be 28 Naples Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Name and Address of New Registered Agent 81 CORPORATION SERVICE COMPANY 1201 HAYS STREET 82 TALLAHASSEE FL 32301-2525 83 84 City id 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registere locate. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered of Section 607.0505, Florida Statutes. 11. Pursuant to the provis office or registered agent, agent. I am familiar with, SIGNA" Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE ☐ Change TITLE 1.1 DILE NAME DRESSLER, PHIL 1.2 NAME 716 WILLOWHEAD DR. 1.3 STREET ADDRESS STREET ADDRESS NAPLES FL 34103 CITY-ST-ZIP 1.4 CiTY-ST-ZiP DELETE ☐ Change Addition 2.1 TITLE TITLE MIKLAVCIC, JOSEPH W NAME 2.2 NAME 716 WILLOWHEAD DR. STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP NAPLES FL 34103 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3 1 TITLE NAME 32 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Channe ☐ Addition TITLE 51 TITLE NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS

14. Thereby 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 truly 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 receive of instee 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

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6 4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELFTE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

Addition

☐ Change