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

**PROFIT CORPORATION ANNUAL REPORT** 

1998

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000064854 (7) DOCUMENT #

PELICAN BAY DEVELOPMENTS I. INC.

Principal Place of Business Mailing Address 24840 BURNT PINE DRIVE 24840 BURNT PINE DRIVE SUITE 2 SUITE 2 BONITA SPRINGS FL 34134 DO NOT WRITE IN THIS SPACE BONITA SPRINGS FL 34134 3. Date Incorporated or Qualified 07/24/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 65-0776243 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 П 28 Trust Fund Contribution Added to Fees Žip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes ΠNo 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CONROY, J. THOMAS III MORRISON & CONROY, P.A. 82 Street Address (P.O. Box Number is Not Acceptable) 3838 TAMIAMI TRAIL NORTH, SUITE 402 83 NAPLES FL 34103 City 85 Zip Code 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. SIGNATURE Signature, typed or printed name of registured agont and title if applicable (NO1E: Registered Agent signature required when reinstating) 12. OFFICERS AND DIHECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 11 1018 Change Addition NAME LAUER, RICHARD A 12 NAME 24840 BURNT PINE DRIVE STREET ADDRESS 1.3 STREET ADDRESS **BONITA SPRINGS FL 34134** CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE TITLE Change ☐ Addition 2.1 TITLE **NASHMAN, JAMES A** 2.2 NAME 24840 BURNT PINE ORIVE STREET ADDRESS 2.3 STREET ADDRESS **BONITA SPRINGS FL 34134** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change TITLE Addition 5.1 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

14. I hereby certify that the information adpolice 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 of 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 conforation of 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 attrictment within address. n/ ---- 98

☐ Change

Addition

**FILED** 

Apr 28 1998 8:00am

Secretary of State