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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000085993

C&W DEVELOPMENT, INC.

Principal Place of Business	Mailing Address				
2055 TRADE CENTER WAY	2055 TRADE CENTER WAY				
NAPLES FL 34109	NAPLES FL 34109				

Mar 08, 1999 8:00 am Secretary of State

03-08-1999 90024 046 ***150.00



Principal Place of Business Mailing Address						- I (1881/1881 ind iditi (dett destt antit				
2055 TRADE CENTER WAY 2055 TRADE CENTE NAPLES FL 34109 NAPLES FL 34109		2055 TRADE CENTER WAY	γ							
MAFLES FL 341	09	14A EES / E 54103					DO NOT WRITE IN THE	S SPACE		
						3.	Date Incorporated or Qualifed		_	
						-	10/06/1997			
2. Principal Pl	ace of Business	2a. Mailing Address				4.	FEI Number	Apr	olied For	
न		26					65-0793660	Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				٦.	Certificate of Status Desired	\$8.75 A	dditional	
2		27				5.	Certificate of Status Desired	Fee Re	quired	
City & State	9	City & State		•		6.	Election Campaign Financing	\$5.00	Мау Ве	
:3		28				1	Trust Fund Contribution	Added to	o Fees	
Zip	Country	Zip	Cou	ntry		8.	This corporation owes the current year Ir	ntangible		
.4	25	29 30	0				Personal Property Tax.	☐ Yes	□No	
·~1	9. Name and Address of Currer	nt Registered Agent	1			10.	Name and Address of New Registered	J Agent		
				81	Name				}	
WOO)d, g. stuart			82	Stroot Addro	200 (E	P.O. Box Number is Not Acceptable)			
2055	TRADE CENTER WAY			02	Street Addre	50 3 (F	.O. Box Hamber is Not Acceptable)			
NAPI	LES FL 34109			83						
				84	City		FI	85 Zip C	code	
office or re agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations.	of Florida, Such change was auti	nonzed	ז עם ו	-named corpo the corporatio	oration n's bo	n submits this statement for the purpose opend of directors. I hereby accept the appoint	of changing its pintment as req	registered gistered	
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable (NOTE: Re	egistered	Agent	signature required	when:	reinstating) DATE			
12.		ND DIRECTORS	13.				ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12	
TITLE	D	☐ DELETE	1.1 Til	1.1 TITLE				☐ Change	☐ Addition	
NAME	COTTER, JEFFREY J		1.2 NA	IAME				*··		
STREET ADDRESS	90 MINNEHAHA CIR		1.3 ST	REET	ADDRESS				-	
	MAITLAND FL 32751			TY-ST						
CITY-ST-ZIP TITLE	D D	☐ DELETE	2.1 TI		- 20			☐ Change	☐ Addition	
	WOOD, G. STUART	_								
NAME	2055 TRADE CENTER WAY				ADDRESS					
STREET ADDRESS			2.4 CITY				~	. .		
CITY-ST-ZIP	NAPLES FL 34109	☐ DELETE	3.1 TI		1-215			Change	☐ Addition	
TITLE			3.2 NA							
NAME			1		4DDDCCC				l	
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		☐ DELETE	4.1 TI	ITY-SI	1-211			Change	Addition	
TITLE										
NAME			4.2 N							
STREET ADDRESS			4.3 ST	REET	ADDRESS					

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 experience of the corporation or the experience of the corporation or the experience of the corporation of the cor officer or director of the corporation or the ed Block 12 or Block 13 if changed, or op an atte

4 4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

☐ DELETE

☐ DELETE

☐ Change

Change

Addition

Addition