

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

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90035 007 ***150.00

DOCUMENT # P97000090837

1. Corporation Name

CORNERSTONE PARK, INC.

Principal Place of Business

3884 PROGRESS AVE
NAPLES FL 34104

Mailing Address

3884 PROGRESS AVE
NAPLES FL 34104

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/22/1997

4. FEI Number

65-0790177

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

GALY, RONALD L
3316 TIMBERWOOD CIRCLE
NAPLES FL 34105

10. Name and Address of New Registered Agent

81 Name

RONALD L. GALY

82 Street Address (P.O. Box Number is Not Acceptable)

27268 BARBAROSSA ST.

83

84 City

BONITA SPRINGS

FL

85 Zip Code

34135

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

Ronald L. Galy

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/30/99

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME GALY, RONALD L
STREET ADDRESS 3316 TIMBERWOOD CIR
CITY-ST-ZIP NAPLES FL 34105 ☐ DELETE

TITLE VD
NAME FREDRICKSON, RANDALL L
STREET ADDRESS 1855 55 ST SW
CITY-ST-ZIP NAPLES FL 34116 ☐ DELETE

TITLE STD
NAME GALY, ALBERT J
STREET ADDRESS 4471 SPRUCE CT
CITY-ST-ZIP MUSKEGON MI 49441 ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME Galy, Ronald L.
1.3 STREET ADDRESS 27268 BARBAROSSA ST.
1.4 CITY-ST-ZIP BONITA SPRINGS, FL 34135

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME FREDRICKSON, RANDALL L.
2.3 STREET ADDRESS 1421 MONARCH CIR.
2.4 CITY-ST-ZIP NAPLES, FL 34116

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE:

Ronald L. Galy

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/99

Date

(441) 261-3433

Daytime Phone #

CR2E034 (11/98)