

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

FILED  
Apr 27 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000093615 (7)

1. Corporation Name

NAPLES 1ST CHOICE REALTY, INC.

Principal Place of Business

2014 SANTA BARBARA BLVD.  
NAPLES FL 34116

Mailing Address

2014 SANTA BARBARA BLVD.  
NAPLES FL 34116

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/23/1997

4. FEI Number

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 or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 4989 Golden Gate Pkwy

Suite, Apt. #, etc

22 City & State  
23 Naples FL

24 Zip 34116 25 Country Collier

2a. Mailing Address

26 4989 Golden Gate Pkwy

Suite, Apt. #, etc.

27 City & State  
28 Naples FL

29 Zip 34116 30 Country Collier

9. Name and Address of Current Registered Agent

LUCAS, ELAINE  
3411 TAMAMI TRAIL NORTH  
SUITE 204  
NAPLES FL 34103

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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 registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME FENWICK, ROBERT M  
STREET ADDRESS 2014 SANTA BARBARA BLVD.  
CITY-ST-ZIP NAPLES FL 34116 ☐ DELETE

TITLE D  
NAME FENWICK, CINDY  
STREET ADDRESS 2014 SANTA BARBARA BLVD.  
CITY-ST-ZIP NAPLES FL 34116 ☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/S/D  
1.2 NAME Fenwick Robert M.  
1.3 STREET ADDRESS 2014 Santa Barbara Blvd  
1.4 CITY-ST-ZIP Naples FL 34116 ☒ Change ☐ Addition

2.1 TITLE J/P/D  
2.2 NAME Jo Anne M. Ramoak  
2.3 STREET ADDRESS 2014 Santa Barbara Blvd  
2.4 CITY-ST-ZIP Naples FL 34116 ☐ Change ☒ Addition

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

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

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

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

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.

SIGNATURE: Robert M Fenwick

(941) 348-1888

CR2E034 (10/97)