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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 15 1998 8:00am

Secretary of State

Addition

Secretary of State
DIVISION OF CORPORATIONS

<u>1998</u>

City-St-ZIP

STREET ADDRESS CITY+ST-ZIP

NAME

DOCUMENT #

P97000100254 (6)

CENTURY DEVELOPMENT OF COLLIER COUNTY, INC.

Oringinal Diago	Pusings		Jollina Address				
Principal Place of Business Mailing Address							
4501 TAMIAMI TRAIL NORTH, STE. 318 4501 TAMIAMI TRAIL NORTH, S NAPLES FL 34103 NAPLES FL 34103					E. 31	8	
MAPLEO PL 04100			1441 EES 1 E 04100				DO NOT WRITE IN THIS SPACE
]							3. Date Incorporated or Qualified
							11/24/1997
2. Principal Plac	e of Business	2a	2a. Mailing Address				4. FEI Number Applied For
21		26					59–3478877 Not Applicable
Suite, Apt. #,	etc.	<u> </u>	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22		27	City & State				Fee Required
City & State		-1	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution
Zip	Country	28	Zφ	T	ountry	,	
24	25	29	\$.q.	30	JEH III Y		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
(==)	9, Name and Address of Curr		stered Agent	1901	7		10. Name and Address of New Registered Agent
LECT	ER, DON				81	Name	
	Tamiami trail North, Sti	E 210				L	
NAPLES FL 34103					82 Street		et Address (P.O. Box Number is Not Acceptable)
147.6					83		
					84	City	FL 85 Zip Code
11. Pursuant to	the provisions of Sections 607.0	502 and €	07.1508, Florida Statu	utos, the	above	name	ed corporation submits this statement for the purpose of changing its registered
office or reg	i ster ed agent, or both, in the Sta familiar with, and accept the obl	ite of Hori ligations o	da. Such chan ge was £ Section 60 7 0 505. E	authoriz Iorida St	ed by atutes	the co	orporation's board of directors. I hereby accept the appointment as registered
i	To the state of th	ngac	.,	ionati ot	4.0.0	,,	
SIGNATURE	nature, typed or printed name of registered	again and tak	- d'appricable (NC	DIL Registe	ed Agr	int signator	ture required when reinstating) DATE
12.	OFFICERS A	ND DIBL		13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE			☐ DELETE	1.1	TITLE	V	P. Change xx Addition
NAME					NAME		John Lux
STREET ADDRESS				1.3	STREET	ADDRESS	s 706 North Glenwood
CITY-ST-ZIP				1.4	CITY-S	T-ZIP	Clearwater, FL 34615
TITLE		DELETE 2		2.1	2.1 TITLE		Change Addition
NAME				2.2	NAME		
STREET ADDRESS				23	STREET	ADDRESS	S
CITY-ST-ZIP					CITY-S	ST-ZIP	
TITLE			DELETE		TITLE		☐ Change ☐ Addition
NAME				3.2	NAME		
STREET ADDRESS				3.3	STREET	ADDRESS	S
CITY-ST-ZIP			Therese		CITY-S	7-ZIP	
TITLE			☐ DELĒTE		TITLE		Change Addition
NAME					NAME		
STREET ADDRESS						ADDRESS	S
CITY-ST-ZIP			DELETE		CITY-S	T- ZIP	Change Addition
TITLE			L.J DELETE	1	TITLE		Change Addition
NAME				1	NAME		
STREET ADDRESS				5.3	STREET	ADDRESS	S

14. I hereby certify that the information supplied with this filling closs not originly for the exercition 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 corporate in security is report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an orders.

5.4 CITY-ST-ZIP

6.3 STREFT ADDRESS

6.1 TITLE 6.2 NAME

DELETE