

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  
Jul 30, 1999 8:00 am  
Secretary of State

07-30-1999 90009 040 \*\*\*150.00

DOCUMENT # 098000061084

1. Corporation Name

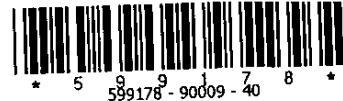
Lake Placid Development of Everglades, Inc.

Principal Place of Business

3824 Exchange Av.  
Naples, FL 34104

Mailing Address

3824 Exchange Av.  
Naples, FL 34104



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

7/9/1998

4. FEI Number

59-3561768

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 3824 Exchange Ave.

23 City & State

23 Naples, FL

24 Zip

24 34104

Country

25 USA

2a. Mailing Address

26 Suite, Apt. #, etc.

27 3824 Exchange Ave.

28 City & State

28 Naples, FL

29 Zip

29 34104

Country

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

J. Gary Shirk  
Thompson & Shirk, P.A.  
2272 Airport Rd. S., #101  
Naples, FL 34112

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

J. GARY SHIRK

(NOTE: Registered Agent signature required when reinstating)

7/27/99

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

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME President

STREET ADDRESS Walter Glass

CITY-ST-ZIP 3824 Exchange AV, Naples, FL 34104

TITLE ☐ DELETE

NAME Vice President, Director

STREET ADDRESS Craig Doan

CITY-ST-ZIP 3824 Exchange AV, Naples, FL 34104

TITLE ☐ DELETE

NAME Treasurer, Secretary, Director

STREET ADDRESS Joel Metts, Vice President

CITY-ST-ZIP 3824 Exchange AV, Naples, FL 34104

TITLE ☐ DELETE

NAME Director

STREET ADDRESS Walter Pontasch

CITY-ST-ZIP 3824 Exchange AV, Naples, FL 34104

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

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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: V.P.

7/21/99

941-434-8818

Date

Daytime Phone #

CR2E034 (11/98)

599178-90009-40  
P 98000061084

THOMPSON & SHIRK, P.A.  
Attorneys at Law

J. Gary Shirk  
Stuart A. Thompson

2272 Airport Road South  
Suite 101  
Naples, Florida 34112  
(941) 417-9900  
(941) 417-9894 fax

July 1, 1999

STATE OF FLORIDA  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
P. O. BOX 6327  
TALLAHASSEE, FL 32314

RE: *Annual Report.*

Dear Sir or Madam:

Enclosed please find a check for \$150.00 representing the 1999 Annual Report filing fee for Lake Placid Development of Everglades Inc. Corporate No. P98000061084.

To date, we have not received an annual report to be filed for 1999. Please send us a 1999 Annual Report so that we can immediately file the same.

Thank you in advance for your cooperation in this matter.

Sincerely,

  
J. GARY SHIRK, ESQ.  
Registered Agent

P.S. The annual report can be sent to either 3824 Exchange Ave. Naples, Florida 34104 or to Thompson & Shirk, P.A. 2272 Airport Road South, Suite 101, Naples, Florida 34112.