

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000033094

1. Entity Name

846 DEVELOPMENTS OF NAPLES, INC.

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90120 047 ***158.75

Principal Place of Business

5475 SHIRLEY STREET. #2
 NAPLES FL 34109

Mailing Address

5475 SHIRLEY STREET. #2
 NAPLES FL 34109-1861

2. Principal Place of Business

4500 EXECUTIVE DRIVE

Suite, Apt. #, etc.

SUITE 300

3. Mailing Address

4500 EXECUTIVE DRIVE

Suite, Apt. #, etc.

SUITE 300

City & State

NAPLES FLORIDA

City & State

NAPLES FLORIDA

Zip

34119

Country

USA

Zip

34119

Country

USA

4. FEI Number

59-3583031

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SZEMPRUCH, DAVID J
 5100 N. TAMiami TRAIL, STE. 201
 NAPLES FL 34103

7. Name and Address of New Registered Agent

Name

JANET KELLY

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

4500 EXECUTIVE DRIVE # 300

City

NAPLES

FL

Zip Code

34119

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

[Signature] JANET KELLY Treasurer *[Signature]* reg agent 2/21/2000
 (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)

X

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution.

□

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D ☐ Delete

NAME HARDY, ROBERT S
 STREET ADDRESS 5475 SHIRLEY STREET, #2
 CITY-ST-ZIP NAPLES FL 34109

TITLE D ☐ Delete

NAME GODE, LARRY J
 STREET ADDRESS 5475 SHIRLEY STREET, #2
 CITY-ST-ZIP NAPLES FL 34109

TITLE ~~PRESIDENT~~ ☐ Delete

NAME ~~LARRY GODE~~
 STREET ADDRESS ~~5475 SHIRLEY STREET #2~~
 CITY-ST-ZIP ~~NAPLES FL 34109~~

TITLE ☐ Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition

NAME PRESIDENT
 LARRY GODE
 STREET ADDRESS 5475 SHIRLEY STREET #2
 CITY-ST-ZIP NAPLES FL 34109

TITLE ☐ Change ☒ Addition

NAME VICE PRESIDENT
 ROBERT S. HARDY
 STREET ADDRESS 4500 EXECUTIVE DRIVE # 300
 CITY-ST-ZIP NAPLES FL 34119

TITLE ☐ Change ☒ Addition

NAME TREASURER
 JANET KELLY
 STREET ADDRESS 4500 EXECUTIVE DRIVE # 300
 CITY-ST-ZIP NAPLES FL 34119

TITLE ☐ Change ☒ Addition

NAME SECRETARY
 JANET KELLY
 STREET ADDRESS 4500 EXECUTIVE DRIVE # 300
 CITY-ST-ZIP NAPLES FL 34119

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] JANET KELLY TREASURER 2/21/2000 (941) 597-9061
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)