Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90229 034 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

i. Corporation	MENT # S00600 NAME ASSOCIATES, INC.	ı								
Principal Place	of Business	Mailing Addres	s				t (8841815 III 88418 84114 55111 a	(8) BION 810	16 BIBIL BIBIL B	10(1 01011 1001
2540 11TH CIRCLE 2540 11TH CIRCLE										
NAPLES FL 33940 NAPLES FL 33940							DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualifed	114 17110 (
							09/04/1990			
2 Principal Pl	ace of Business	2a. Mailing Add	iress				4. FEI Number		Ar	plied For
	ace of business	26					59-3037459		_ 	t Applicable
21 Suite, Apt. :	#_etc	Suite, Apt.	#, etc.					7	\$8.75	Additional
22		27					5. Certifcate of Status Desired		Fee Re	quired
City & State	•	City & State	e				6. Election Campaign Financing		\$5.00	May Be
23		28					Trust Fund Contribution		Added	to Fees
Zip	Country	Zip		Count	try		8. This corporation owes the current			
24	25	29	30	<u> </u>			Personal Property Tax.		Yes	□No
	9. Name and Address of Curren	t Registered Agent			81 1		10. Name and Address of New Rec	istered A	gent	
CANI	DITO IOCEDII ID			ľ	ווי	Name				
CANDITO, JOSEPH, JR. 2540 11TH CIRCLE					82	Street Addre	ess (P.O. Box Number is Not Acceptable	∍)		
NAPLES FL 34103				_	33					
NAC I	LES FL 34103			1	3					
				Ε	84 (City		FL	85 Zip	Code
office or re agent. I as	egistered agent, or both, in the State in familiar with, and accept the obligation Signature, typed or printed name of registered age	of Florida, Such cha tions of, Section 607	inge was auth 7.0505, Florida	onzed i Statut	es.	e corporatio	oration submits this statement for the pun's board of directors. I hereby accept to the punch of	ne appoin	ment as re	gistered
12.		ID DIRECTORS	<u>(</u>	13.			ADDITIONS/CHANGES TO OFFIC	CERS AN	DIRECTO	ORS IN 12
TITLE	D		DELETE	1.1 TITU	E	ļ			☐ Change	☐ Addition
NAME	CANDITO, PATRICIA			1.2 NAM	Œ					
STREET ADDRESS	2540 11TH CIRCLE			1.3 STR	EET AC	DDRESS				1
CITY-ST-ZIP	NAPLES FL			1.4 CITY	/-ST-Z	IP				
TITLE	D :		DELETE	2.1 TTL	E				☐ Change	☐ Addition
NAME	CANDITO, JOSEPH P., JR.			2.2 NAM	Æ					
STREET ADDRESS	2540 11TH CIRCLE			2.3 STR	EET AC	DDRESS				
CITY-ST-ZIP	NAPLES FL			2. 4 CIT	Y-ST-2	ZIP				
TITLE	D		DELETE	3.1 TITL	.E		•		Change	☐ Addition
NAME	CANDITO, JULIE			3.2 NAM	Æ					İ
STREET ADDRESS	2540 11TH CIRCLE			3.3 STR	EETA	DORESS				
CITY-ST-ZIP	NAPLES FL			3.4. CIT		ZIP				- Addition
TITLE			DELETE	4.1 TITL	Æ				☐ Change	☐ Addition
NAME	,			4. 2 NA						
STREET ADDRESS						DDRESS				
CITY-ST-ZIP			DCLEYC	4.4 CITY		ZIP			Change	☐ Addition
TITLE		Ц	DELETE	5.1 TITE						☐ Addition
NAME	•			5.2 NAM		DODESC	•			
STREET ADDRESS						DORESS				
CITY-ST-ZIP			DELETE	5.4 CITY 6.1 TITL		-11"		•	Change	Addition
TITLE			OLLL IE	62 NAM						_

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS