DOCUMENT # s04833					FILED May 08, 2002 8:00 an Secretary of State			
BUY	YERS REALTY OF NAPLES,	INC.				ary 01 S 90007 004 ***		
Principal Pi	Place of Business	Mailing Address						
801 L	AUREL OAK DRIVE	801 LAUREL O	NAW DRI	rt up				
SUITE NAPLES	3 400 S, FL 34108	SUITE 400		V E				
			34108	_			(43)	
1061 CO	al Place of Business OLLIER CENTER WAY	3. Mailing Address	- Theresian II.		LEEPHERS NO TRANSPORT CONT. EDISH.	ARABI KADIN BANIN BANIN IN	AND HAVE WHEN	
Suite, Apt	pt. #, etc.	Suite, Apt. #, etc.	<u>CENTE</u>	R WAY	DO NOT WRITE	IN THIS SPACE		
City & Sta	tate	SUITE 4 City & State		.	4. FEI Number		T. C. P.	
Zip	Country	NAPLES, FL	Country		650219295		Applied For Not Applicable	
341		26110	1	ry USA	5. Certificate of Status Desired	\$8.75 A	Additional ired	
		(egistered Agent	-+	Name	7. Name and Address of New Reg	Istered Agent		
801 SUIT	E. LESTER LAUREL OAK DRIVE TE 400 PLES, FL 34108			DON E. LESTER Street Address (P.O. Box Number is Not Acceptable) 1061 COLLIER CENTER WAY SUITE 4				
	ve named entity submits this statement for			City NAPLES	S	FL Zip Co	34110	
Tax filing i	Signaturs, typed or printed name of registered agent an poration is eligible to satisfy its intangible prequirement and elects to do so. OFFICERS AND DI	FILE PUBLISH Pries Mev 4. 25 Maker Obserk Payan		ill by \$500 co.	10. Election Campaign Finance Trust Fund Contribution.	Adde	.00 May Be	
TITLE	S	Delete	12. TITLE		ADDITIONS/CHANGES TO OFFICE			
IAME STREET ADDRESS	SUZANNE F. LESTER		NAME STREET A	ADDRESS		☐ Change		
CITY-ST-ZIP	4688 OAKLEAF NAPLES, FL 34119		CITY-ST-				Addition	
AME] T	Delete	TITLE NAME			☐ Change	☐ Addition	
TREET ADDRESS	9927 KONA ISLE CT.		STREET AC					
ITLE	ORLANDO, FL 32817	Delete	CITY-ST-	ZIP		7.		
INCEL ADDITEGO	CHARLES D. WICKLIFFE 27056 JARVIS ROAD		NAME STREET AD	ADDRESS		☐ Change	☐ Addition	
17.5	BONITA SPRINGS, FL. 3/	4135	CITY-ST-2					
	P 2088 ^E OAKESTER	☐ Delete	TITLE NAME			☐ Change	Addition	
TREET ADDRESS	NAPLES, £1: 34119		STREET AD					
TLE		☐ Delete	CITY-ST-Z	ZIP				
AME TREET ADDRESS TY-ST-ZIP			NAME STREET AD			. ☐ Change	Addition	
TLE ME	İ	☐ Delete	TITLE			☐ Change	Addition	
REET ADDRESS TY-ST-ZIP	ı		NAME STREET ADD CITY-ST-ZI	71P		_ •		
I hereby ce indicated cof the corp changed,	certify that the information supplied with this on this report or supplemental report is tru- poration or the receiver or trustee empoyer or on an attachment with an address, with	s filing does not quality for the and accurate and that my ared to execute this report a n all other like empowered.			Florida Statutes; and that my name app	ner certify that the in that I am an officer of pears in Block 11 or	oformation or director Block 12 if	