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Mar 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S30516** (6)
1. Corporation Name
LANDMARK REAL ESTATE OF COLLIER COUNTY, INC.



Principal Place of Business
**2308 IMMOKALEE RD.
NAPLES FL 33942
US**

Mailing Address
**2308 IMMOKALEE RD.
NAPLES FL 34110-1414
US**

2. Principal Place of Business
21 **2310 Immokalee Rd.**
Suite, Apt. #, etc.

22 City & State
23 **Naples, FL**

24 Zip **34110** 25 Country **Collier**

26 27 28 29 30

9. Name and Address of Current Registered Agent
**CATALANO FISHER GREGORY & CROWN CHARTERED
4001 TAMiami TR N
STE 404
NAPLES FL 33940**

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 _____
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **WHISNAND, ROY**
STREET ADDRESS **2308 IMMOKALEE RD.**
CITY-ST-ZIP **NAPLES FL**

TITLE **D**
NAME **BUTLER, POLLY**
STREET ADDRESS **2308 IMMOKALEE RD.**
CITY-ST-ZIP **NAPLES FL**

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CITY-ST-ZIP

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CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS **2310 Immokalee Rd.**

1.4 CITY-ST-ZIP **Naples, FL 34110**

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS **2310 Immokalee Rd.**

2.4 CITY-ST-ZIP **Naples, FL 34110**

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 do 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

SIGNATURE _____

3/15/97 941-597-3000

CR2E034 (9/96)