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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V05522

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FILED
May 02 1997 8:00am
Secretary of State

ASTELLO DRIVE ASTELLO DRIVE COUNTY 25 US,4 Name and Address of Curre WILLIAM R III MPELLANE FL 34103	Suite, Apt. #, etc. 27	Country 30 USA 81 Name 82 Street	01/09/1992 4. FEI Number 65-0305464 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability to Florida Statutes 10. Name and Address of New I	or intangible	\$8.75 Fee R \$5.00 Added tax under s	pplied For of Applicable Additional legulred May Be to Fees s. 199.032,
Country 25 US, 4 Name and Address of Curre WILLIAM R III DMPEI LANE	Suite, Apt. #, etc. 27	Country 30 USA 81 Name 82 Street	5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability to Florida Statutes 10. Name and Address of New I	or intangible Yes [\$8.75 Fee R \$5.00 Added tax under s	Additional lequired May Be to Fees
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o. Name and Address of Curre 7, WILLIAM R III DMPELLANE 2		81 Name			Agent	
OMPEI LANE 12		82 Street	WAM R. JANNEY			
re provisions of Sections 607.05 stered agent, or both, in the Stat milliar with, and accept the oblig	02 and 607 1508, Florida Statu e of Florida. Such change was gations of, Section 607.0505, F	83 5 U 84 City	ITE 32 APLES corporation submits this statement for the torallion's board of directors. I hereby according to the control of	FL	85 Zip 32 I changing pointment as	Code 1103 its registered s registered
above bened or realled name of renslored as	pent and tilki if amplicable (NO	TE: Registered Agent signature	required when reinstating)	DATE		····
		13.		FICERS AND	DIRECTO	
	☐ DELETE	1.1 TITLE	Vρ		Change	Additio
		. 1.2 NAME	MARGARET G. JAN	WEY		
		1.3 STREET ADDRESS	1268 POMPEI LAN	E		
	T on or	1.4 CITY-ST-ZIP	NAPLES, FL 3416	23	T Observe	1 Address
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	alters, typical or practical name of registored as	OFFICERS AND DIRECTORS OFFICERS AND DIRECTORS ANNEY, WILLIAM R III 268 POMPEI LANE APLES FL S ANNEY, PATRICIA U 45 FIRST AVE, NORTH	OFFICERS AND DIRECTORS 13. DELETE 1.1 HITE 1.2 NAME 288 POMPEI LANE ANNEY, WILLIAM R III 288 POMPEI LANE APLES FL DELETE 2.1 TITLE ANNEY, PATRICIA U 45 FIRST AVE, NORTH APLES FL DELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP DELETE 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS ANNEY, WILLIAM R III 268 POMPEI LANE APLES FL 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP DELETE 1.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 3.4 CITY-ST-ZIP DELETE 4.1 TITLE 4.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP DELETE 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP DELETE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP DELETE DELETE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP DELETE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP DELETE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP DELETE 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP DELETE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP DELETE 6.1 TITLE 6.2 NAME	OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS ANNEY, WILLIAM R III 268 POMPEI LANE APLES FL 1 DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 1.5 TITLE 2.7 STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-2IP 1.5 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-2IP 1.5 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-2IP 1.5 TITLE 5.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-2IP 1.5 TITLE 5.5 NAME 5.3 STREET ADDRESS 5.3	OFFICERS AND DIRECTORS DELETE 1.1 TITLE

4. 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

MALEND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/97

941-414-8585