

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

FILED
Jan 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # V12926 (4)

1. Corporation Name

D. W. ENTERPRISES OF NAPLES, INC.



Principal Place of Business

Mailing Address

9136 GULF SHORE DR
NAPLES FL 33963

1360 RAILHEAD BLVD
#A
NAPLES FL 34110
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 9030 GULF SHORE DR

Suite, Apt. #, etc.

22

City & State

23 Naples FL

Zip

24 34108

Country

25 COLLIER

2a. Mailing Address

26 27040 OLD 41 RD

Suite, Apt. #, etc.

27

City & State

28 Bonita Springs FL

Zip

29 34135

Country

30 LEE

3. Date Incorporated or Qualified

02/07/1992

4. FEI Number

65-0315700

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MULLARKEY DON
9136 GULF SHORE DRIVE
NAPLES FL 33963

10. Name and Address of New Registered Agent

81 Name

MULLARKEY DON

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

9030 GULF SHORE DR

83

84 City

Naples

FL

85 Zip Code

34108

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME VP
MULLARKEY, WILLA
STREET ADDRESS 9136 GULF SHORE DR
CITY-ST-ZIP NAPLES FL

TITLE ☐ DELETE

NAME P
MULLARKEY, DON
STREET ADDRESS 9136 GULF SHORE DR
CITY-ST-ZIP NAPLES FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

9030 Gulf Shore Dr
Naples FL 34108

2.1 TITLE

☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

9030 Gulf Shore Dr
Naples FL 34108

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 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: Don Mullarkey

12-13-98

9136 GULF SHORE DR

CR2E034 (10/97)