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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V34709

NAPLES FL

NAPLES FL

ARNOLD, DONALD L.

1361 AIRPORT ROAD NORTH

CITY-ST-7IP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

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(8)

ARNOLD & ARNOLD INVESTMENTS, INC.

Size Application Size								
APPLES FL 39942 2. Principal Place of Business 2a. Mailing Address 2b. 4. FEI Number NOT APPLICABLE NOT APPLIC						(120/1 21/200 11/1 21/11 10/11 20/12 20/12		
2. Principal Place of Businoss 2a. Mailing Address 4. FEI Number Applied For NOT APPLICABLE Applied For NOT Applied For N								
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Suite, Apt. #, etc. Suite, Apt. #, etc.	26					NOT APPLICABLE		Not Applicable
City & State	Suite, Apt	<u> </u>	#, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
Zip Country Zip Country	City & State	•	City & State	City & State				
ARNOLD, DONALD L 1381 AIRPORT ROAD NORTH NAPLES FL 33942 82 Street Address (P.O. Box Number is Not Acceptable) 83	Žip	⊢ ′	Zip	_	ry	8. This corporation has liability for it	ntangible tax unde	
ARROUD, DONALD C 1381 AIRPORT ROAD NORTH NAPLES FL 33942 82 Street Address (P.O. Box Numbor is Not Acceptable) 83 84 City FL 85 Zip Code 85 86 87 87 88 88 88 88 88 88				<u> </u>		10. Name and Address of New Re	stered Agent	
1381 AIRPORT ROAD NORTH NAPLES FL 33942 82 Street Address (P.O. Box Numbor 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 register 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 arimitar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Suprature: typed or printed name of registered agent and bit of applicable. (NOTE Registered Agent signature required when reinstating) DATE 12.	ARNI	OLD DONALD I		8	1 Name			
NAPLES FL 33942 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 register office or reg stored 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 registere agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: typicd or printed name of registered agent and tale it applicable. (NOTE Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 NAME ARNOLD, DEAN A. 12 NAME 1381 AIRPORT ROAD NORTH 13 STREET ADDRESS CITY-ST-ZIP INTE D D DELETE 11 LITIE D Change Add ARNOLD, TAMARA D. 1381 AIRPORT ROAD NORTH 22 NAME SIREET ADDRESS CITY-ST-ZIP NAPLES FL 1381 AIRPORT ROAD NORTH 23 STREET ADDRESS CITY-ST-ZIP NAPLES FL 24 City-ST-ZIP NAPLES FL 25 STREET ADDRESS CITY-ST-ZIP NAPLES FL 26 City-ST-ZIP NAPLES FL 27 Code City ST-ZIP Change Add Add ARNOLD, TAMARA D. 22 NAME 23 STREET ADDRESS CITY-ST-ZIP NAPLES FL 24 CITY-ST-ZIP				-				
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 register office or reg stored 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and fill if applicable. NAME ARNOLD, DEAN A. 12 NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Add ARNOLD, DEAN A. 12 NAME 13. STREET ADDRESS 1361 AIRPORT ROAD NORTH 1.3 STREET ADDRESS CITY-ST-ZIP INTE D DELETE 1.4 CITY-ST-ZIP NAME ARNOLD, TAMARA D. 1381 AIRPORT ROAD NORTH 2.3 STREET ADDRESS CITY-ST-ZIP NAPLES FL 1381 AIRPORT ROAD NORTH 2.3 STREET ADDRESS CITY-ST-ZIP NAPLES FL 1381 AIRPORT ROAD NORTH 2.3 STREET ADDRESS CITY-ST-ZIP NAPLES FL 2.4 CITY-ST-ZIP NAPLES FL 2.4 CITY-ST-ZIP NAPLES FL 2.5 CITY-ST-ZIP NAPLES FL 2.4 CITY-ST-ZIP NAPLES FL 2.4 CITY-ST-ZIP NAPLES FL 2.4 CITY-ST-ZIP NAPLES FL 2.4 CITY-ST-ZIP NAPLES FL					Street At	daress (P.O. Box Number is Not Acceptab	ie)	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its register of directors. I hereby accept the appointment as 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 reinslating) OATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 INTILE O D DELETE 1.1 TITLE ORANGE SIREET ADDRESS CITY-ST-ZIP NAPLES FL D DELETE 1.4 CITY-ST-ZIP INTILE D DELETE 2.1 TITLE D Change Add ARNOLD, TAMARA D. SIREET ADDRESS CITY-ST-ZIP NAPLES FL 1.361 AIRPORT ROAD NORTH 2.3 STREET ADDRESS CITY-ST-ZIP NAPLES FL 2.4 CITY-ST-ZIP NAPLES FL	1001	2512 00012		8	3			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its register of director. I hereby accept the appointment as registered agent, or both, in the Statute 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 SUBJECT OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. INTILE D OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. INTILE ARNOLD, DEAN A. 1.2 NAME SIREET ADDRESS CITY-ST-ZIP NAPLES FL D DELETE 1.4 CITY-ST-ZIP INTILE D ARNOLD, TAMARA D. SIREET ADDRESS LIY-ST-ZIP NAPLES FL 1.361 AIRPORT ROAD NORTH 2.3 SIREET ADDRESS DITY-ST-ZIP NAPLES FL 2.4 CITY-ST-ZIP NAPLES FL 2.5 SIREET ADDRESS DITY-ST-ZIP NAPLES FL 2.4 CITY-ST-ZIP				<u>_</u>			12217	- 0-4-
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Suprature: typed or printed name of registered agent and ntlo it applicable. (NOTE Registered Agent signature required when reinstating) DATE				8	4 City			p Code
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12.	SIGNATURE		of and tile if each tible /AIOTE B	Panistand A	neat signatura re	on ited when reinclohed)	DATE	
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NAME ARNOLD, ANDREA K. 32 NAME	**	_	_	1	1		·	
STREET ADDRESS 1361 AIRPORT ROAD NORTH 33 STREET ADDRESS	** **				1			

11. 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 12 or Block 12 or Block 13 or Block 13 or Block 14 or Block 15 or Block 15 or Block 15 or Block 16 or Block 17 or Block 17 or Block 17 or Block 18 or Bloc

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Feb 18 1997 8:00am

Secretary of State

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