

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 17 AM 11:46

DOCUMENT # V57292

(7)

1. Corporation Name

NEW TOWN PROPERTIES, INC.

Principal Place of Business

Mailing Address

**2017 MCGREGOR BLVD.
FORT MYERS FL 33901**

**2017 MCGREGOR BLVD.
FORT MYERS FL 33901**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/10/1992

3a. Date of Last Report

01/24/1994

4. FEI Number

65-0350590

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under § 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21. Subt. Apt. #, etc.

26. Subt. Apt. #, etc.

22. City & State

27. City & State

23. Zip

28. Zip

24. Country

29. Country

25. Country

30. Country

9. Name and Address of Current Registered Agent

**DAVID CARLETON HALL
2017 MCGREGOR BLVD.
FORT MYERS FL 33901**

10. Name and Address of New Registered Agent

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 607.0303, and 607.1509, 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 607.0303, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Registered Agent's Attorney)

(Signature of Registered Agent or Registered Agent's Attorney)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONAL NAMES TO OFFICERS AND DIRECTORS (If any)

NAME	DP
STREET ADDRESS	WILLIAM P. VALENTI
CITY, ST, ZIP	2017 MCGREGOR BLVD. FORT MYERS FL
NAME	DV
STREET ADDRESS	TAYLOR, HAROLD S. JR
CITY, ST, ZIP	2017 MCGREGOR BLVD. FORT MYERS FL
NAME	DST
STREET ADDRESS	DAVID CARLETON HALL
CITY, ST, ZIP	2017 MCGREGOR BLVD. FORT MYERS FL
NAME	D
STREET ADDRESS	PARNELL, SIDNEY
CITY, ST, ZIP	2017 MCGREGOR BLVD FORT MYERS FL
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

NAME	☐ Change ☐ Addition
STREET ADDRESS	
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CITY, ST, ZIP	
NAME	☐ Change ☐ Addition
STREET ADDRESS	
CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032(4)(b), Florida Statutes. I further certify that this information is used only for the annual report or biennial 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 registered agent or person empowered to execute this report as required by Chapter 199, Florida Statutes, and that my name appears on the 1, 2, or 3, of the Florida Department of State's annual report.

SIGNATURE:

David Carleton Hall
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/95 813-334-2020
Date Telephone