## 2006 FOR PROFIT CORPORATION

## **FILED** Mar 13, 2006 08:00 AM

ANNUAL KEPUKI				Secretary of State			
DOCUMENT # P01000085971  1. Entity Name PATIO PEOPLE OF NAPLES, INC.			Secretary of State				
	ace of Business AMI TRAIL N 2 34103	Mailing Address 4562 TAMIAMI TRAIL N NAPLES, FL 34103			RI <b>Bere</b> i i <b>ren 8580 be</b> ri <b>84</b> 0	# <b>80</b>	! !! <b>!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!</b>
Ε	OO NOT WRITE	· · · · · · · · · · · · · · · · · · ·	CE	02282008  4. FEI Numb 59-373 5. Certificate		CR2E034 (11/0	Applied For Not Applicable
6. Name and Address of Current Registered Agent  JOBLING, PAUL A 4562 TAMIAMI TRL N NAPLES, FL 34103			DO NOT WRITE IN THIS SPACE				
	e named entity submits this statement for the atlons of registered agent.  Sommer, special printed name of registered agent and to		ed office or register		th, in the State of Flo	rida. I am familiar wul	h, and accept
After M	LE NOW!!! FEE IS \$150.00 lay 1, 2006 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	ncing \$5.	.00 May Be ed to Fees			
TO. THE NAME STREET ADDRESS CHY-S1-7P	D JOBLING, PAUL A 1921 CRESTVIEW WAY #180 NAPLES, FL 34119	ECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE	D JOBLING, ELAINE G 1921 CRESTVIEW WAY #180 NAPLES, FL 34119		·		10000 10455780	)U45571U 3-80046-024	150.00
NAME STREET ADDRESS CITY-ST-ZIP TIZLE NAME					NOT W		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	,						
TITLE MANGE STREET ADDRESS CITY+ST-ZIP							

12. Thereby certify that the information supplied with this lifting does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE

SIGNATURE TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytone Phone 1

JOBLING PRES