2008 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT

DOCUMENT # P97000047683

1. Entity Name
JAMES R. STAPLETON, P.A.

FILED Mar 05, 2008 08:00 Al Secretary of State

Principal Place of Business

3373 RAINBOW LANE NORTH FT MYERS, FL 33903

SIGNATURE: 🗹

Mailing Address

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1318 LAFAYETTE ST. CAPE CORAL, FL 33904



		01112008 No Chg-P CR2E034 (11/05)					
DC	NOT WRITE I	4. FEI Number 65-0756949				Applied For Not Applicable	
		5. Certificate of Status Desired S8.75 Additional Fee Required					
	. Name and Address of Current Regis	tered Agent					
STAPLETON, 3373 RAINBC NORTH FT M		DO NOT WRITE IN THIS SPACE					
the obligations	ned entity submits this statement for the p of registered agent.					I am familiar	with, and accept
Sign	sture, typed or printed name of registered agent and title	if applicable (NOTE, Registere)	d Agent signature require	d when reinstating)		JAIE	· · · · · · · · · · · · · · · · · · ·
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution				i.00 May Be ded to Fees			1
10.	OFFICERS AND DIREC	CTORS		-			
NAME STREET ADDRESS 33	STD APLETON, JAMES R 73 RAINBOW LANE DRTH FT MYERS, FL 33903				U000008 03/19/03-8	147537 30024-00)4 150.nn
TITLE NAME STREET ADDRESS CITY-ST-ZIP			:				
TITLE NAME STREET ADDRESS CITY-SI-ZIP				DO N	NOT WR	ITE	İ
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN TI	HIS SPA	CE	
NAME STREET ADDRESS CITY-ST-ZIP*		. 1	ş.				and the second
TITLE NAME STREET ADDRESS CITY ST-ZIP				-	-		••
12. I hereby certificated on too of the corporate changed, or of	ly that the information supplied with this f this report or supplemental report is true ation or the receiver or trustee empowere on an attachment with an address, with	iling does not qualify for the exi and accurate and that my signa of Oexecute this report as requi il other life empowered.	emptions containe ture shall have the red by Chapter 60	d in Chapter 119, F same legal effect a: 7, Florida Statutes;	lorida Statutes. I furthes if made under oath; and that my name app	er certify that that I am an o sears in Block	the information fficer or director 10 or Block 11 if

3-1-08

Date

239-656-4998