


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 18, 2005 8:00 am
Secretary of State

02-18-2005 90059 040 ***150.00

DOCUMENT # P02000110677	
1. Entity Name SOUTHWEST FLORIDA INVESTMENTS CORPORATION OF COLLIER	

Principal Place of Business 1100 FIFTH AVE. SOUTH, STE. 201 NAPLES FL 34102	Mailing Address 1100 FIFTH AVE. SOUTH, STE. 201 NAPLES FL 34102
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2. Principal Place of Business 3375 TAMiami TRAIL EAST	3. Mailing Address 3375 TAMiami TRAIL EAST
Suite, Apt. #, etc. Suite 300	Suite, Apt. #, etc. Suite 300
City & State NAPles, FL	City & State NAPles, FL
Zip 34112	Country U.S.A.



1st MOORE CR2E034 (10/04)

6. Name and Address of Current Registered Agent PELIER, ROBERT N ESQ. 1431 PONCE DE LEON BLVD. CORAL GABLES FL 33134	
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7. Name and Address of New Registered Agent Name SAMUEL D. BLANCO Street Address (P.O. Box Number is Not Acceptable) 3375 TAMiami TRAIL EAST Suite 300 City NAPles FL Zip Code 34112	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Samuel D. Blanco* **SAMUEL D. BLANCO, D.** **2/8/05**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00** May Be
Trust Fund Contribution. ☐ Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PELIER, ROBERT N 1100 FIFTH AVE. SOUTH, STE. 201 NAPLES FL 34102 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLANCO, SAMUEL D 1100 FIFTH AVE. SOUTH, STE. 201 NAPLES FL 34102 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D IZQUIERDO, DANIEL 1100 FIFTH AVE. SOUTH, STE. 201 NAPLES FL 34102 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D IZQUIERDO, RICARDO 1100 FIFTH AVE. SOUTH, STE. 201 NAPLES FL 34102 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FERRO, DAMIAN 1100 FIFTH AVE. SOUTH, STE. 201 NAPLES FL 34102 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3375 TAMiami TRAIL EAST, Ste. 300 NAPles, FL 34112
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3375 TAMiami TRAIL EAST, Ste. 300 NAPles, FL 34112
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3375 TAMiami TRAIL EAST, Ste. 300 NAPles, FL 34112
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3375 TAMiami TRAIL EAST, Ste. 300 NAPles, FL 34112
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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 empowered 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: *Samuel D. Blanco* **SAMUEL D. BLANCO, D.** **2/8/05** **218-0332**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #