2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737048

FILED Mar 21, 2007 Secretary of State

Entity Name: NAPLES BRIDGE CENTER, INC.

Current Principal Place of Business: New Principal Place of Business:

5865 GOLDEN GATE PARKWAY NAPLES, FL 34116

Current Mailing Address: New Mailing Address:

5865 GOLDEN GATE PARKWAY NAPLES, FL 34116

FEI Number: 59-1713376 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BECKWIH, ROBERT ZIONS, BERNARD Z 131 PALMETTO DUNES CIR 5601 TURTLE BAY DR. #1601 NAPLES, FL 34113 NAPLES, FL 34108

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.

SIGNATURE: BERNARD Z. ZIONS 03/21/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete STONE, JULIE V BECKWITH, ROBERT Name: Name: 8108 COSTA BRAVA CT Address: 131 PALMETTO DUNES CIR. Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip: NAPLES, FL 34113

Title: VPD () Delete Title: (X) Change () Addition MORRIS, CHUCK Name: CIPOLLA, TONY Name:

Address: 675 VIA NEGNER #102 Address: 12831 CARRINGTON CIR. #101

City-St-Zip:

NAPLES, FL 34109 City-St-Zip: NAPLES, FL 34105

Title: (X) Delete Title: () Change () Addition ZIONS, B.Z. Name: Name:

5601 TURTLE BAY DR #1601 Address: Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip:

Title: PD (X) Delete Title: () Change () Addition

Name: BECKWITH, ROBERT Name: Address: 131 PALMETTO DUNES CIR Address: City-St-Zip: NAPLES, FL 34113 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BERNARD Z. ZIONS **PRES** 03/21/2007