

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90318 034 ***150.00

DOCUMENT # 326177

1. Entity Name
THE SCOTTSDALE CO.



Principal Place of Business
**4200 GULF SHORE BLVD. NORTH
NAPLES, FL 34103 US**

Mailing Address
**4200 GULF SHORE BLVD. NORTH
NAPLES, FL 34103 US**

40083191



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04172008

Chg-P

CR2E034 (12/06)

4. FEI Number

36-2495903

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CATALANO, ANTHONY J
4001 TAMiami TRAIL N
SUITE 250
NAPLES, FL 34103**

7. Name and Address of New Registered Agent

Name

Robert C. Zundel, Jr.

Street Address (P.O. Box Number is Not Acceptable)

4001 Tamiami Trail North

Suite 250

City

Naples

FL

Zip Code

34103

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Robert C. Zundel, Jr.

4/30/2008

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME LUTGERT, S.F.
STREET ADDRESS 4200 GULF SHORE BLVD. N.
CITY-ST-ZIP NAPLES, FL 34103

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VSD ☐ Delete
NAME BAKER, R.J.
STREET ADDRESS 4200 GULF SHORE BLVD N
CITY-ST-ZIP NAPLES, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VTD ☐ Delete
NAME GUTMAN, H.B.
STREET ADDRESS 4200 GULF SHORE BLV N.
CITY-ST-ZIP NAPLES, FL 34103

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME MILLER, KIMBERLY
STREET ADDRESS 4200 GULF SHORE BLVD N
CITY-ST-ZIP NAPLES, FL 34103

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Howard B. Gutman
Vice President**

4/30/2008 (239) 261-6100

Date

Daytime Phone #