

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 645558

**Entity Name:** H.S. DEVELOPMENTS (NAPLES), INC.

**Current Principal Place of Business:**

2375 TAMIAMI TRAIL NORTH  
SUITE 110  
NAPLES, FL 34103

**Current Mailing Address:**

2375 TAMIAMI TRAIL NORTH  
SUITE 110  
NAPLES, FL 34103 US

**FEI Number:** 59-1970634

**Certificate of Status Desired:** No

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

STARMAN, SHELDON  
2375 TAMIAMI TRAIL NORTH  
SUITE 110  
NAPLES, FL 34103 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name SOUPCOFF, KAREN  
Address 1485 WHITEHORSE RD  
City-State-Zip: DOWNSVIEW, ONTARIO CN M3J-2Z2

Title VD  
Name ZUBCOV, ROCHELLE  
Address 1485 WHITEHORSE RD  
City-State-Zip: DOWNSVIEW, ONTARIO CN M3J-2Z2

Title TD  
Name MARRIOTT, FERN  
Address 1485 WHITEHORSE RD  
City-State-Zip: DOWNSVIEW, ONTARIO CN M3J-2Z2

Title SD  
Name ORR, YVONNE  
Address 1485 WHITEHORSE RD  
City-State-Zip: DOWNSVIEW, ONTARIO CN M3J-2Z2

*I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KAREN SOUPCOFF

**PRES**

**01/21/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date