2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 347027

1. Entity Name
DAVID COMPANY OF NAPLES, INCORPORATED

Principal Place of Business	Mailing Address
696 16TH AVE. SO. NAPLES, FL 34102 US	696 16TH AVE SO NAPLES, FL 34102 US

DO NOT WRITE IN THIS SPACE

01072007   No Chg-P   CR2E034 (11/05)

4. FEI Number 59-1269108	Applied For
	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PFAFF, DAVID N
696 16TH ST S
NAPLES, FL 34102

DO NOT WRITE IN THIS SPACE

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

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

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

10.   OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	PFAFF, DAVID N PRES
STREET ADDRESS	696 16TH AVE. SO.
CITY-ST-ZIP	NAPLES, FL 34102
TITLE	VP
NAME	PAGE, CHARLES M
STREET ADDRESS	225 S. LOGAN BLVD.
CITY-ST-ZIP	NAPLES, FL 34119
TITLE	AT
NAME	ROJAS, SUSAN P
STREET ADDRESS	941 21ST ST. SW
CITY-ST-ZIP	NAPLES, FL 34117
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000581175
01/10/07-80077-014 150.00

DO NOT WRITE IN THIS SPACE

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 _____ DAVID N. PFAFF, Pres 1/7/07 239/261-8984

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #