

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 353528

Entity Name: 936 FIFTH INC

FILED  
Mar 29, 2005  
Secretary of State

**Current Principal Place of Business:**

936 FIFTH AVE SOUTH  
NAPLES, FL 33940

**New Principal Place of Business:**

936 FIFTH AVE SOUTH  
NAPLES, FL 34102

**Current Mailing Address:**

936 FIFTH AVE SOUTH  
NAPLES, FL 34102 US

**New Mailing Address:**

FEI Number: 59-1274081      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

LANGFORD, GEORGE  
3357 TAMIAMI TRAIL NORTH  
NAPLES, FL 34103 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: GINOS, MARYLIN,  
Address: 575 PALM CIRCLE  
City-St-Zip: NAPLES, FL

Title: V ( ) Delete  
Name: ELKINS, JAMES,  
Address: 1000 TAMIAMI TRAIL N  
City-St-Zip: NAPLES, FL

Title: S ( ) Delete  
Name: LANGFORD, GEORGE,  
Address: 3357 TAMIAMI TRAIL NORTH  
City-St-Zip: NAPLES, FL 34103

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PT (X) Change ( ) Addition  
Name: GINOS, MARYLIN,  
Address: 575 PALM CIRCLE  
City-St-Zip: NAPLES, FL 34102 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MARYLIN GINOS

PT

03/29/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date