**2004 FOR PROFIT CORPORATION** 

## Feb 12, 2004 8:00 am ANNUAL REPORT (AR) **Secretary of State DOCUMENT # 547944** 02-12-2004 90023 024 \*\*\*158.75 BETHUNE ENTERPRISES OF NAPLES, INC. Principal Place of Business Mailing Address C/O EARL C. BETHUNE 828 ST.CLAIR SHORES RD C/O EARL C. BETHUNE 4615 ENTERPRISE AVE 77760056 NAPLES FL 33942 NAPLES FL 34104 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) 4. FEI Number Applied For City & State City & State 59-1763052 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Shirley A. Bethune Street Address (P.O. Box Number is Not Acceptable) BETHUNE, EARL C. 828 ST. CLAIR SHORES ROAD 828 ST CLATE SHORES NAPLES FL 33942 NAPLES Zip Code 34104 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. SHI RLEY A. BETHUNE SIGNATURE Sharpey, A. Bethune PVTD Signature, typed printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be 9. Election Campaign Financing Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. □ Delete Change Addition TITLE TITLE BETHUNE, EARL C. NAME NAME 828 ST. CLAIR SHS ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAPLES FL CITY-ST-ZIP President, V.T.D. Shirley Bethune, Shirley A. 828 St. Clair Shores Road Delete TITLE ☐ Addition TITLE NAME BETHUNE, SHIRLEY A. NAME STREET ADDRESS 828 ST. CLAIR SHS ROAD STREET ADDRESS NAPLES FL CITY-ST-ZIP CITY-ST-ZIP Naples, FL 34104 ☐ Delete TITLE ☐ Change ■ Addition BETHUNE, SHIRLEY A. NAME NAME STREET ADDRESS STREET ADDRESS 828 ST. CLAIR SHS ROAD CITY-ST-ZIP CITY-ST-ZIP NAPLES FL VPD ☐ Delete ☐ Change Addition TITLE TITLE BETHUNE, EARL C. J NAME NAME 1121 ST. CLAIR SHORES RD. STREET ADDRESS STREET ADDRESS NAPLES FL CITY-ST-ZIP CITY-ST-7IP VPD ☐ Delete ☐ Change Addition TITLE TITLE BETHUNE, MARVIN EUGENE NAME NAME 3530 7TH AVE. N.W. STREET ADDRESS STREET ADDRESS NAPLES FL CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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.

**FILED** 

SIGNATURE: Slinley A. Bethune Shirley A. Bethune
SIGNATURE SIGNATURE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Res, Trea, Sec., D.