## 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Feb 20, 2006 08:00 AM **DOCUMENT # 547944 Secretary of State** 1. Entity Name BETHUNE ENTERPRISES OF NAPLES, INC. Mailing Address Principal Place of Business C/O EARL C. BETHUNE B28 ST.CLAIR SHORES RD NAPLES FL 34104 828 ST CLAIR SHORES RD NAPLES FL 34104 2. Principal Place of Business 3. Mading Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) Applied For City & State City & State 4. FEI Number 59-1763052 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent Name BETHUNE, SHIRLEY A Street Address (P.O. Box Number is Not Acceptable) 828 ST. CLAIR SHORES ROAD NAPLES FL 33942 Zip Code City 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. DATE Signature, typed or printed name of registered agent and title it applicable (NOTE Registered Agent aignature required when rematahing) FILE NOW!!! FEE IS \$150.00 \$5.00 May 5. After May 1, 2006 Fee Will Be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Change ☐ Addition ☐ Oelete 71717 BETHUNE, SHIRLEY A. NAME NAME STREET ADDRESS 828 ST. CLAIR SHORES ROAD STREET ADDRESS U00000440319 CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34104 #3/<del>102/66-80036-007, [558, 75</del>] ☐ Delete TITLE TOLE NAME NAME BETHUNE, SHIRLEY A. 828 ST. CLAIR SHS ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZOP CITY-ST-ZIP NAPLES FL ☐ Change ☐ Detete BILL TITLE VPD NAME MAME BETHUNE, EARL C. J SIRFFI ADDRESS STREET ADDRESS 1121 ST, CLAIR SHORES RD. CITY-ST-ZIP CITY-ST-7/P NAPLES FL ☐ Adam ☐ Change ☐ Detete TITLE TITLE NAME BETHUNE, MARVIN EUGENE NAME 3530 7TH AVE. N.W. STREET ACCRESS STREET ADDRESS CHIY-ST-ZIP CITY-ST-ZIP NAPLES FL Change □A." ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Additi ☐ Delete TITLE 3)1) 5 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this fitting does not qualify for the exemptions contained in Section 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 direction 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 1

SIGNATURE: Shirley A. Bethune SHIRLEY A. BETHUNE

if changed, or on an attachment with an address, with all other like empowered.

FILED

2-14-2006 (239) 643-0357