

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 28, 2002 8:00 am**  
**Secretary of State**

05-28-2002 91739 015 \*\*\*150.00

**DOCUMENT # 660774**

1. Entity Name

NAPLES OPEN AIR STORAGE , INC

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
3606 DOMESTIC AVE

Suite, Apt. #, etc.

3. Mailing Address  
3606 DOMESTIC AVE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
NAPLES FL

City & State  
NAPLES FL

4. FEI Number  
59-1962446

Applied For  
Not Applicable

Zip  
34104

Country  
USA

Zip  
34104

Country  
USA

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

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
SMITH, GEORGE G. , JR.

Street Address (P.O. Box Number is Not Acceptable)  
3606 DOMESTIC AVE

City  
NAPLES

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. ☐  
(See criteria on back)

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$300.00  
Amended UBR is \$61.28  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
P D  
GEORGE G SMITH , JR  
3606 DOMESTIC AVE  
NAPLES FL 34104

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
ANITA SMITH  
3606 DOMESTIC AVE  
NAPLES FL 34104

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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**DO NOT WRITE  
IN THIS SPACE**

13. 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 11 or on an attachment with an address with all other like empowered.

SIGNATURE:

*George G Smith, Jr* GEORGE G SMITH , JR

5/1/02 239-1828

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)