2005 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT (AR)

DOCUMENT # 704554

1. Entity Name



FILED Feb 28, 2005 8:00 am Secretary of State

Purple Picco of Dusiness Sulfish Picco	COLLIER			02-28-2005 90200 004 ****61.25					
2. Principal Place of Business 3. Mailing Address 5. Suite, Apt. 4, etc. 1st MOORE CR2637 (10/04) City & State City & State 1st MOORE CR2637 (10/04) Zip Country Zip Country S. Certificate of Susus Desired September 59-6166907 September 59-6166907 No Applied For For Register of September 59-6166907 Se	Principal Plac	e of Buśiness	Mailing Address	•					
Sullis, Apt. F., 6fb. City & Sate T. Name and Address of Current Registered Agent T. Name and Address of New Registered Agent The Address of	137 12TH A NAPLES FL	VE, SOUTH 34102 ************************************		5 - F. (1894) (187) - F. (1874) (1891 - 1889) - F. (1874) 	. • Farikalı bi ibbi				
City & State Specificate of Status Doesed Survey Specificate For Preparation For Code For Co	2. Principal P	lace of Business	3. Mailing Address						
Specificate of States Desired Sp. 75 Additional Flor Applicable Sp. 75 Additional Flor Applicabl	Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		1st MOORE	CR2E037 (10/04)		
S. Certificate of Salary Desired For Proposed F	City & Stat	e	City & State				^-		
BURKE, BILL BOND, SCHOENECK & KING 4001 TAMIAMI TRAIL NORTH, SUITE 250 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 accopt the ubligations of registered agent. SIGNATURE City FL Zin Code	Zip	Country	Zip	Country		5. Certificate of Status Desired			
BURKE, BILL BOND, SCHOENECK & KING 4001 TAMIAMI TRAIL NORTH, SUITE 250 NAPLES FL 34103 City City FL Zip Code Florida: Department of State Florida: Department of	6. Name and Address of Current Registered Agent								
BOND, SCHOENECK & KING 4001 TAMIAMI TRAIL NORTH, SUITE 250 NAPLES FL 34103 City	and the second s			Name	`Name				
Addition NAPLES FL 34103 City	BOND, SCHOENECK & KING				Street Address (P.O. Box Number is Not Acceptable)				
8. The above named entity submits this statement for the purpose of changing its registered affect or registered agent, or both, in the State of Florida. I am familiar with, and accopt the obligations of registered agent. SIGNATURE Symbor, yield or profession of registered agent agent and for it applicable. NOTE flegistered Agent agent agent agent and when remotating) DATS									
THE HOME STEEL ADDRESS CITY-ST-2P NAPLES FL 34102 THE MAKE CHORS SOLVE STEEL ADDRESS CITY-ST-2P NAPLES FL 34102 THE MAKE CHORS SOLVE STEEL ADDRESS CITY-ST-2P NAPLES FL 34102 THE MAKE STREET ADDRESS STREET ADDRESS CITY-ST-2P NAPLES FL 34102 THE MAKE STREET ADDRESS STREE	l NAI	LL3 1 L 34103		City			FL Zip Co	ode	
Squature, tyme or primer name of inguineer agent and took is applicable. NOTE Registered Agent signature induced when rendating) DATE									
Squature, tyme or primer name of inguineer agent and took is applicable. NOTE Registered Agent signature induced when rendating) DATE	CICANATURE								
Due By May 1, 2005 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 INTE MAME WINGARD, DONALD 130 11TH AVE., S. NAPLES FL 34102 INTE TRUST PART ADDRESS CITY-ST-2PP ADDRESS CITY-ST-2PP INTE BM MCDANIEL, BERTHA 385 12TH AVE., S NAPLES FL 34102 INTE MAME SIREET ADDRESS CITY-ST-2PP NAPLES FL 34102 INTE MAME NALDERTT, PENNY NAPLES FL 34102 INTE MAME SIREET ADDRESS CITY-ST-2PP NAPLES FL 34102 INTE MAME NALDERTT, PENNY NAPLES FL 34102 INTE MAME SIREET ADDRESS CITY-ST-2PP NAPLES FL 34102 INTE MAME SIREET ADDRESS									
Delebe MANE MINGARD, DONALD Delebe MANE C. Donald Smith C. Donald Smith Sifeet Address Delebe MANE C. Donald Smith	INTERPORTED INTERP							State	
WINGARD, DONALD SIREET ADDRESS 130 11TH AVE., S. NAPLES FL 34102 TITLE NAME SIREET ADDRESS CITY-ST-ZIP NAPLES FL 34103 TITLE NAME SIREET ADDRESS CITY-ST-ZIP NAPLES FL 34102 TITLE NAME SIREET ADDRESS CITY-ST-ZIP NAPLES FL 34103 TITLE NAME SIREET ADDRESS CITY-ST-ZIP NAPLES FL 34102	10.	OFFICERS AND D	IRECTORS		Α	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS	IN 10	
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CITY-ST-ZIP NAPLES FL 34102 TITLE T	_			NAME (C. De	onald Smith	,		
TILLE NAME FAIRBANKS, KATHY STREET ADDRESS CITY-ST-ZIP NAME NAME NALDREST, ZEP NAPLES FL 34110 Delete NAME SIREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME NAME NALDRETT, PENNY STREET ADDRESS CITY-ST-ZIP NAPLES FL 34102 TILLE BM NALDRETT, PENNY STREET ADDRESS CITY-ST-ZIP NAPLES FL 34102 TILLE STREET ADDRESS STREET ADDRESS STARET ADDRESS NAPLES FL 34102 TILLE SM SIRDEL, JAMES STREET ADDRESS STARET ADDRESS STARET ADDRESS STARET ADDRESS NAPLES FL 34102 TILLE SM SPRINKLE, JOHN STREET ADDRESS NAPLES FL 34102 TILLE SM SPRINKLE, JOHN STREET ADDRESS NAPLES FL 34102 TILLE SM SPRINKLE, JOHN STREET ADDRESS NAPLES FL 34102 TILLE SM SPRINKLE, JOHN STREET ADDRESS NAPLES FL 34102 TILLE SM STREET ADDRESS NAPLES FL 34102		· ·		STREET ADDRESS	250	Spring Line Drive	•		
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ITILE BM CDANIEL, BERTHA STREET ADDRESS CITY-ST-ZIP NAPLES FL 34102 TITLE BM NALDRETT, PENNY STREET ADDRESS CITY-ST-ZIP NAPLES FL 34102 TITLE BM NALDRETT, PENNY STREET ADDRESS CITY-ST-ZIP NAPLES FL 34102 TITLE BM Change NAPLES FL 34102 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAPLES FL 34102 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAPLES FL 34102 TITLE BM Change MAddition NAME STREET ADDRESS CITY-ST-ZIP NAPLES FL 34102	CITY-ST-ZIP	NAPLES FL 34110		CITY-ST-ZIP	Magl:	es. Fl. 34103			
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TITLE NAME NALDREST, PENNY 2220 SNOOK DRIVE STREET ADDRESS CITY-ST-ZIP NAPLES FL 34102 TITLE NAME SIEDEL, JAMES STREET ADDRESS CITY-ST-ZIP NAPLES FL 34103 Delete TITLE NAME SIREET ADDRESS CITY-ST-ZIP NAPLES FL 34103 Delete TITLE NAME SIREET ADDRESS CITY-ST-ZIP NAPLES FL 34103 Delete STREET ADDRESS CITY-ST-ZIP NAPLES FL 34103 Delete STREET ADDRESS CITY-ST-ZIP NAPLES FL 34102 TITLE NAME SPRINKLE, JOHN 1290 THIRD ST., S. NAPLES FL 34102 NAPLES FL 34102 TITLE SPRINKLE, JOHN 1290 THIRD ST., S. NAPLES FL 34102 NAME STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34102 TITLE SPRINKLE, JOHN NAME STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34102 TITLE SPRINKLE, JOHN NAME STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34102		*							
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CITY-ST-ZIP NAPLES FL 34102 TITLE BM SIEDEL, JAMES STREET ADDRESS CITY-ST-ZIP NAPLES FL 34103 Delete TITLE BM Cherry Smith Northern Trust Bank-STREET ADDRESS CITY-ST-ZIP NAPLES FL 34103 TITLE BM SPRINKLE, JOHN NAME SPRINKLE, JOHN 1290 THIRD ST., S. NAPLES FL 34102 CITY-ST-ZIP NAPLES FL 34102 TITLE BM Change Change Addition NAME Cherry Smith Northern Trust Bank-STREET ADDRESS CITY-ST-ZIP NAPLES FL 34102 TITLE BM Change Change Addition NAME STREET ADDRESS CITY-ST-ZIP NAPLES FL 34102 THE BM Change Change Addition NAME STREET ADDRESS CITY-ST-ZIP NAPLES FL 34102 THE BM Change Change Addition NAME STREET ADDRESS CITY-ST-ZIP NAPLES FL 34102			•	NAME	viary	Pattide Daire			
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Maples, FL 34102		· ·						j	
			u at de la company						

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 617, 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:

TED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

239-261-8164

Dayturne Phone #