## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F03000005923

SIGNATURE:



FILED Apr 14, 2006 8:00 am Secretary of State

239-643-2129

1. Entity Name AVALON ENTERPRISES OF NAPLES, INC.					04-14-2006 90143 003 ***150.00				
Principal Place of Business Maiting Address 160 86TH ST. 160 86TH ST. STONE HARBOR, NJ 08247 STONE HARBOR, NJ 08247			8247			1274 274 2124 2 <b>224</b> 222	l fâm ekeri far		82:8 CZ
2. Principal P	lace of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01192006	Chg-P	CR2E034 (11/05)			
City & State		City & State			4. FEI Number 22-3117088			Applied For Not Applicable	
Zíp	Country	Zip	Соиг	ntry	5. Certificate of Status Desired			\$8.75 Additional Fee Required	
	6. Name and Address of Current	Name	7. Name and A	Address of New R	egistered A	gent			
NOVATT, JEFF M ESQ 321 FIFTH AVE. SOUTH, STE. 201 NAPLES, FL 34102			Street Address (P.O. Box Number is Not Acceptable)						
\				City			FL	Zip Cod	le
8. The above the obligat	named entity submits this statement follows of registered agent.	red agent, or both	, in the State of Flo		ımilizr with,	and accept			
SIGNATURE  Signature, typed or printed name of registered against and title of applicable. (NOTE: Registered Against signature required set							DATE	· · · · · · · · · · · · · · · · · · ·	
	E NOW!!! FEE IS \$150.00 ny 1, 2006 Fee will be \$550.	9. Election Campai	ign Finas	ncing _ \$5.	.00 May Be ed to Fees		<u> </u>	. , ,,,,	
10.	OFFICERS AND		11.		ADDITIONS/C	HANGES TO OFF	ICERS AND	DIRECTOR	S IN 11
NAME STREET ADDRESS CITY-ST-ZIP	CPT WILLIAMS, ROY V JR 160 86TH ST. STONE HARBOR, NJ 08247	☐ Delete						Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS WILLIAMS, JOY A 160 86TH ST. STONE HARBOR, NJ 08247	□ Delete	1					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	•					Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Oelete	1			,		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					······	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						☐ Change	Addition
indicated of the cor	certify that the information supplied wit on this report or supplemental report poration or the receiver or trustee emp or on an attachment with an address,	s true and accurate and that r owered to execute this report	ny signa as requi	ture shall have the a	same legal effect	as if made under o	oath: that I ar	n an office	r or director