

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004021

FILED  
Jan 05, 2007  
Secretary of State

Entity Name: FTC NAPLES MANAGER, INC.

## Current Principal Place of Business:

3000 IMMOKALEE RD  
SUITE 5  
NAPLES, FL 34110

## New Principal Place of Business:

## Current Mailing Address:

3000 IMMOKALEE RD  
SUITE 5  
NAPLES, FL 34110

## New Mailing Address:

FEI Number: 20-3136364

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

R&A AGENTS, INC.  
850 PARK SHORE DRIVE  
NAPLES, FL 34103 US

## Name and Address of New Registered Agent:

CRAWFORD, RICHARD S  
3000 IMMOKALEE RD  
SUITE 5  
NAPLES, FL 34100 US

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: RICHARD S CARWFORD

01/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: CRAWFORD, RICHARD S  
Address: 3000 IMMOKALEE RD SUITE 5  
City-St-Zip: NAPLES, FL 34110

Title: DVP ( ) Delete  
Name: ERB, JOHN  
Address: 604 EAST VALLEY CHASE  
City-St-Zip: BLOOMFIELD HILLS, MI 48304

Title: DVP ( ) Delete  
Name: JAFFE, IRA J  
Address: 2777 FRANKLIN ROAD, SUITE 2500  
City-St-Zip: SOUTHFIELD, MI 480348214

Title: DS ( ) Delete  
Name: CRAFT, CARL D  
Address: 800 NORTH OLD WOODWARD AVE. SUITE 201  
City-St-Zip: BIRMINGHAM, MI 48009

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD S CRAWFORD

DP

01/05/2007

Electronic Signature of Signing Officer or Director

Date