2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H62978

FILED Mar 28, 2009 Secretary of State

Entity Name: COMMERCIAL PROPERTIES OF NAPLES INC.

Littly Nan	ile. COMMER	CIAL PROFERTILS OF MAP	LES, INC.				
Current Principal Place of Business:				New Principal Place of Business:			
809 WALK SUITE 3	ERBILT ROAD			3365 WOODS EDGE #104	CIRCLE		
NAPLES, FL 34110 US				BONITA SPRINGS, FL 34134 US			
Current Mailing Address:				New Mailing Address:			
809 WALKERBILT ROAD				3365 WOODS EDGE CIRCLE			
SUITE 3 NAPLES, F	FL 34110 U	S		#104 BONITA SPRINGS, FI	L 34134	US	
FEI Number:	59-2552269	FEI Number Applied For ()	FEI Num	nber Not Applicable ()	Certifi	cate of Status Desire	ed ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
WANDERON, THOMAS 809 WALKERBILT ROAD SUITE 3 NAPLES, FL 34110 US				WANDERON, THOMAS 3365 WOODS EDGE CIRCLE SUITE 104 BONITA SPRINGS, FL 34135 US			
The above in the State		ubmits this statement for the	purpose of	f changing its registere	d office o	r registered agent,	or both,
SIGNATURE: THOMAS WANDERON				03/28/2009			
	Electroni	ic Signature of Registered Ag	jent			Date	_
Election Can	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DP () JENSEN, PATRI 641 HICKORY F NAPLES, FL 34	RD.		Title: Name: Address: City-St-Zip:	() Change	e () Addition	
Title: Name: Address: City-St-Zip:	D () WANDERON, TH 27268 BARBARI BONITA SPRINC	OSA STREET		Title: Name: Address: City-St-Zip:	() Change	∋ () Addition	

I hereby certify that the information supplied with this filing does not qualify 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: THOMAS WANDERON D 03/28/2009