## 2007 FOR PROFIT CORPORATION

## Apr 09, 2007 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT #L39924 04-09-2007 90056 046 \*\*\*150.00 1. Entity Name SDK OF NAPLES, INC. Mailing Address 400004° Principal Place of Business 225 WEST WACKER DRIVE., #2800 444 N MICHIGAN AVE STE 3230 CHICAGO, IL 60611 US ATTN: ALAN ROTH CHICAGO, IL 60606 03282007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0220926 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM DO NOT WRITE 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 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 accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE LEES, MARSHALL D NAME STREET ADDRESS 444 N MICHIGAN AVE STE 3230 CITY-ST-ZIP CHICAGO, IL 60611 THE ROHNER, RANDALL NAME 444 N MICHIGAN AVE STE 3230 STREET ADDRESS CITY-ST-ZIP CHICAGO, IL 60611 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE

STREET ADDRESS CITY-ST-ZIP

> Kandall W Rohner SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED