2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

Feb 09, 2006 08:00 AM Secretary of State DOCUMENT # N29806 1. Entity Name THE NEW ATTITUDES CLUB OF NAPLES, INCORPORATED Principal Place of Business Mailing Address 2740 BAYSHORE DR UNIT #14 2740 BAYSHORE DR UNIT #14 NAPLES, FL 34112 NAPLES, FL 34112 02072006 No Chg-NP CR2E037 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0089770 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SISKIN, DANIEL DO NOT WRITE 4321 BEACHWOOD LAKE DRIVE NAPLES, FL 34112 IN THIS SPACE 3. 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, typed or printed name of registered agent and title & applicable. (NOTE: Registered Agent argreture required when reinstating) \$5.00 May Be Election Campaign Financing Filing Fee is \$61.25 Trust Fund Contribution. Due by May 1, 2006 Added to Fees OFFICERS AND DIRECTORS 10. D TITLE MATLACK, RICHARD L. MANE STREET ADDRESS 17 SONDERHEN CIR COY-ST-7P NAPLES, FL 34114 D 7-7-The section of the section RRE NAME OAKES, SHANE STREET ADDRESS 2647 PELTON AVE CITY-ST-ZIP NAPLES, FL 34112 TIRE MAME SISKIN, DANIEL STREET ADDRESS 4321 BEECHWOOD LAKE DR DO NOT WRITE CITY-ST-ZIP NAPLES, FL 34112 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP BBE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 ceith; 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 charged, or or an attachpent-with an address, with all other liberathrowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED