



2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90384 024 ****70.00

DOCUMENT # N96000005924 1. Entity Name MARBELLA SERVICES, INC.					
Principal Place of Business 7425 PELICAN BAY BLVD NAPLES, FL 34108 US				Mailing Address 850 PARK SHORE DRIVE NAPLES, FL 34103 US	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 7425 PELICAN BAY BLVD Suite, Apt. #, etc.			
City & State NAPLES, FLORIDA		City & State NAPLES, FLORIDA		4. FEI Number 59-3428049	
Zip 34108		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FALK, STEVEN M 850 PARK SHORE DRIVE THIRD FLOOR NAPLES, FL 34103				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE PD NAME JONES, HENRY STREET ADDRESS 7425 PELICAN BAY BLVD CITY-ST-ZIP NAPLES, FL 34108	<input checked="" type="checkbox"/> Delete		TITLE PD NAME WHALEN, SAM STREET ADDRESS 7425 PELICAN BAY BLVD CITY-ST-ZIP NAPLES, FL 34108	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE VD NAME COUNSELMAN, CHARLES STREET ADDRESS 7425 PELICAN BAY BLVD. CITY-ST-ZIP NAPLES, FL 34108	<input checked="" type="checkbox"/> Delete		TITLE VPD NAME WERNIG, RAY STREET ADDRESS 7425 PELICAN BAY BLVD CITY-ST-ZIP NAPLES, FL 34108	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE SD NAME REINS, ROBERT STREET ADDRESS 7425 PELICAN BAY BLVD. CITY-ST-ZIP NAPLES, FL 34108	<input checked="" type="checkbox"/> Delete		TITLE SD NAME DEITCH, BETTY STREET ADDRESS 7425 PELICAN BAY BLVD CITY-ST-ZIP NAPLES, FL 34108	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE TD NAME HUGHEY, STANLEY STREET ADDRESS 7425 PELICAN BAY BLVD. CITY-ST-ZIP NAPLES, FL 34108	<input checked="" type="checkbox"/> Delete		TITLE TD NAME GRADY, WILLIAM STREET ADDRESS 7425 PELICAN BAY BLVD CITY-ST-ZIP NAPLES, FL 34108	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE D NAME HOYT, JOHN STREET ADDRESS 7425 PELICAN BAY BLVD CITY-ST-ZIP NAPLES, FL 34108	<input checked="" type="checkbox"/> Delete		TITLE D NAME CARROLL, JIM STREET ADDRESS 7425 PELICAN BAY BLVD CITY-ST-ZIP NAPLES, FL 34108	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 617, 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: <u>Betty Ann Deitch</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u>4-11-06</u> Daytime Phone # <u>239-593-2300</u>		

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