## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000049233

Entity Name: CHM OF NAPLES, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

36 9TH HST. SOUTH, SUITE 4 36 9TH ST. SOUTH SUITE 4

NAPLES, FL 34102 NAPLES, FL 34102

Current Mailing Address: New Mailing Address:

36 9TH HST. SOUTH, SUITE 4 36 9TH ST. SOUTH SUITE 4

NAPLES, FL 34102 NAPLES, FL 34102

FEI Number: 59-3645799 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MCINTOSH, CYNTHIA H
1300 GOODLETTE ROAD NORTH

MCINTOSH, CYNTHIA H
36 9TH ST SOUTH SUITE 4

NAPLES, FL 34102 US NAPLES, FL 34102 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: CYNTHIA HILL MCINTOSH 04/29/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete Title: PRES (X) Change ( ) Addition

Name: MCINTOSH, CYNTHIA H Name: MCINTOSH, CYNTHIA H

 Address:
 1300 GOODLETTE ROAD NORTH
 Address:
 141 5TH ST N

 City-St-Zip:
 NAPLES, FL 34102
 City-St-Zip:
 NAPLES, FL 34102

Title: SEC ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MCINTOSH, SHANE A
 Name:

 Address:
 141 5TH ST N
 Address:

 City-St-Zip:
 NAPLES, FL 34102
 City-St-Zip:

Title: DIR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MCINTOSH, ANDREW P
 Name:

 Address:
 141 5TH ST N
 Address:

 City-St-Zip:
 NAPLES, FL 34102
 City-St-Zip:

Title: DIR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MCINTOSH, SHANE A III
 Name:

 Address:
 141 5TH ST N
 Address:

 City-St-Zip:
 NAPLES, FL 34102
 City-St-Zip:

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: CYNTHIA HILL MCINTOSH PRES 04/29/2008