

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2005 8:00 am
Secretary of State

03-14-2005 90098 021 ***150.00

DOCUMENT # P01000068265	
1. Entity Name D & G COLLECTIONS, INC.	



Principal Place of Business 26251 S. TAMiami TRAIL 16 BONITA SPRINGS, FL 34135	Mailing Address 26251 S. TAMiami TRAIL 16 BONITA SPRINGS, FL 34135
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00043430



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

02112005 Chg-P CR2E034 (10/03)

4. FEI Number 59-3730495	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
IRRESISTIBLY PLUS 26251 S. TAMiami TRAIL #16 BONITA SPRINGS, FL 34135	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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	DATE
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FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP	CITY-ST-ZIP	CITY-ST-ZIP
☐ Delete	☐ Change ☐ Addition	☐ Delete	☐ Change ☐ Addition
COO	NAGLE, GARY		
3410 TRALEE COURT #202	3410 TRALEE COURT #202		
BONITA SPRINGS, FL 34134	BONITA SPRINGS, FL 34134		
☐ Delete	☐ Change ☐ Addition	☐ Delete	☐ Change ☐ Addition
P	DELRE, DEBBIE		
3410 TRALEE COURT #202	3410 TRALEE COURT #202		
BONITA SPRINGS, FL 34134	BONITA SPRINGS, FL 34134		
☐ Delete	☐ Change ☐ Addition	☐ Delete	☐ Change ☐ Addition
☐ Delete	☐ Change ☐ Addition	☐ Delete	☐ Change ☐ Addition
☐ Delete	☐ Change ☐ Addition	☐ Delete	☐ Change ☐ Addition
☐ Delete	☐ Change ☐ Addition	☐ Delete	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Debbie Delre</i>	DATE: <i>2/11/05</i>
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SIGNATURE AND TYPED OR PRINTED NAME OF EXERCISING OFFICER OR DIRECTOR

Date

Daytime Phone #