

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91040 017 ***150.00

DOCUMENT # P01000072422					
1. Entity Name NAPLES SCHOOL BUS INC					
Principal Place of Business 695 5TH AVE SOUTH NAPLES, FL 34102			Mailing Address 695 5TH AVE SOUTH NAPLES, FL 34102		
2. Principal Place of Business 649 5TH AVE SOUTH		3. Mailing Address 649 5TH AVE SOUTH			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State NAPLES FL		City & State NAPLES FL		4. FEI Number 51-0422009	
Zip 34102		Country U.S.A.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BONDARENKO, MICHAEL G 895 10TH STREET SOUTH SUITE 302 D NAPLES, FL 34102			7. Name and Address of New Registered Agent Name: MICHAEL BONDARENKO Street Address (P.O. Box Number is Not Acceptable): 649 5TH AVE SOUTH City: NAPLES FL 34102		
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: MICHAEL BONDARENKO DATE: 4/28/04 <small>(NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BONDARENKO, MICHAEL G 649 5TH AVE SOUTH NAPLES, FL 34102	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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:			MICHAEL BONDARENKO DATE: 4/28/04 DAYTIME PHONE: 239-434-0777		