

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000117044

1. Entity Name  
Naples Architectural Precast, Inc.

FILED

02 OCT 28 AM 10:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

5770 Shirley Street

Suite, Apt. #, etc.

3. Mailing Address

5770 Shirley Street

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Naples FL

City & State

Naples FL

4. FEI Number

02-0503717

Applied For

Not Applicable

Zip

34109

Country

USA

Zip

34109

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

WOOD, Douglas A Esq.

Street Address (P.O. Box Number is Not Acceptable)

3600 Sky Pkwy + Wood

1000 North Tamiami Trail Ste 201

City

Naples

FL

Zip Code

34102

**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director Dawn T DeLuca 2101 Tarpon Road Naples FL 34109	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director Benjamin Lowens 3586 Kent Drive Naples FL 34112	TITLE NAME STREET ADDRESS CITY - ST - ZIP	000008626070 10/28/02--01086--002 *\$158.75
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director Anthony J. DeLuca 115 Flamevine Drive Naples FL 34110	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/24/02 (239) 598-4141

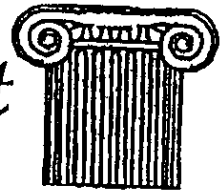
CR2E034B (12/01)

gs 11/4/02



# Naples Architectural Precast

Balustrade • Columns • Fireplaces • Pavers • Pool Coping



Florida Department of State  
Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Document number- P01000117044

Please find enclosed our Uniform Business Report and a check for the \$150.00 filing fee. The business was incorporated in December 2001. We did not receive the Uniform Business Report for the year 2001.

Thank you for your help in this matter.

Sincerely,

Ben Owens  
President