
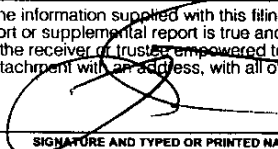


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2006 8:00 am
Secretary of State

03-06-2006 90004 025 ***150.00

DOCUMENT # P02000131173 1. Entity Name R&D VILLA HOMES, INC.																																																																																															
Principal Place of Business 14890 BELLEZZA LANE NAPLES, FL 34110			Mailing Address 14890 BELLEZZA LANE NAPLES, FL 34110																																																																																												
2. Principal Place of Business 14895 Bellezza Ln.		3. Mailing Address 14895 Bellezza Ln.																																																																																													
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																													
City & State Naples, FL		City & State Naples, FL		4. FEI Number 14-1869404																																																																																											
Zip 34110		Country USA		Applied For <input type="checkbox"/> Not Applicable																																																																																											
Zip 34110		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																											
6. Name and Address of Current Registered Agent THOMAS, GARLICK B ESQ 5551 RIDGEWOOD DRIVE SUITE 101 NAPLES, FL 34108			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>																																																																																															
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																												
<div style="display: flex;"> <div style="flex: 1;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">D</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>RUBINTON, JON</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>14890 BELLEZZA LANE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NAPLES, FL 34110</td> <td></td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr><td colspan="3"> </td></tr> </table> </div> <div style="flex: 1;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">14895 Bellezza Ln.</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr><td colspan="3"> </td></tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr><td colspan="3"> </td></tr> </table> </div> </div>						TITLE	D	<input type="checkbox"/> Delete	NAME	RUBINTON, JON		STREET ADDRESS	14890 BELLEZZA LANE		CITY-ST-ZIP	NAPLES, FL 34110					TITLE		<input type="checkbox"/> Delete				TITLE		<input type="checkbox"/> Delete				TITLE		<input type="checkbox"/> Delete				TITLE		<input type="checkbox"/> Delete				TITLE		<input type="checkbox"/> Delete				TITLE	14895 Bellezza Ln.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP						TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition				TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition				TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition				TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition				TITLE		<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 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 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:  Jon Rubinton 2/17/06 239-592-0134																																																																																															
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																															