

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 30, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000060927

1. Entity Name
M&H DEVELOPMENT OF NAPLES INC.



Principal Place of Business

**3710 3RD AVE SW
NAPLES, FL 34117**

Mailing Address

**3710 3RD AVE SW
NAPLES, FL 34117**

DO NOT WRITE IN THIS SPACE



02082005 No Chg-P CR2E034 (10/03)

4. FEI Number
30-0183773

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MARZUCCO, MARCIA
3710 3RD AVE SW
NAPLES, FL 34117**

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

Marcia Marzucco - Director

(NOTE: Registered Agent Signature required when reinstating)

DATE

3/28/05

**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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HAMMOND, GUY
STREET ADDRESS	3710 3RD AVE SW
CITY-ST-ZIP	NAPLES, FL 34117
TITLE	D
NAME	MARZUCCO, JOSEPH
STREET ADDRESS	3710 3RD AVE SW
CITY-ST-ZIP	NAPLES, FL 34117
TITLE	D
NAME	MARZUCCO, MARCIA
STREET ADDRESS	3710 3RD AVE SW
CITY-ST-ZIP	NAPLES, FL 34117
TITLE	D
NAME	BARTLETT, KATHRYN
STREET ADDRESS	3710 3RD AVE SW
CITY-ST-ZIP	NAPLES, FL 34117
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000280286
03/30/05-80011-025 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/05

Date

239 4557242

Daytime Phone #