

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000077416

1. Entity Name
PORKCHOP POOLS OF NAPLES, INC.



Principal Place of Business
**481 14TH STREET SOUTHEAST
NAPLES, FL 34117**

Mailing Address
**481 14TH STREET SOUTHEAST
NAPLES, FL 34117**

DO NOT

06282006 No Chg-P CR2E034 (11/05)

4. FEI Number: **57-1178298** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22 STREET, 4TH FLOOR
MIAMI, FL 33145**

**DO NOT
IN THIS**

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
CORDEIRO, DAVID M
481 14TH STREET SOUTHEAST
NAPLES, FL 34117**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VS
CORDEIRO, ARLEEN M
481 14TH STREET SOUTHEAST
NAPLES, FL 34117**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
REIDY, STEPHEN C JR
481 14TH STREET SOUTHEAST
NAPLES, FL 34117**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000587907
07/05/06-00001-009 150.00

**DO NOT
IN THIS**

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 reports 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 life empowered.

SIGNATURE:

David M. Cordeiro
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-06

Date

239-889-3889
TELEPHONE DAYTIME