

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000147185

Entity Name: ADVENTURES OF NAPLES, INC.

FILED  
May 01, 2008  
Secretary of State

## Current Principal Place of Business:

27499 RIVERVIEW CT BLVD  
STE 224  
BONITA SPRINGS, FL 34134

## New Principal Place of Business:

27806 FORESTER DRIVE  
BONITA SPRINGS, FL 34135

## Current Mailing Address:

27499 RIVERVIEW CT BLVD  
STE 224  
BONITA SPRINGS, FL 34134

## New Mailing Address:

27806 FORESTER DRIVE  
BONITA SPRINGS, FL 34135

FEI Number: 56-2393277

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TOMEI, ANTHONY  
27499 RIVERVIEW CENTER BLVD  
BONITA SPRINGS, FL 34134 US

## Name and Address of New Registered Agent:

TOMEI, ANTHONY  
27806 FORESTER DRIVE  
BONITA SPRINGS, FL 34135 US

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:

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: TOMEI, ANTHONY  
Address: 8350 ESTERO BLVD  
City-St-Zip: FT MYERS BEACH, FL 33931

Title: D ( ) Delete  
Name: STEFANACCI, DENNIS  
Address: 605 LODIQUE CIRCLE #803  
City-St-Zip: NAPLES, FL 34119

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: STEFANACCI, DENNIS  
Address: 605 LALIQUE CIRCLE #803  
City-St-Zip: NAPLES, FL 34119

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENNIS STEFANACCI

DIR

05/01/2008

Electronic Signature of Signing Officer or Director

Date