

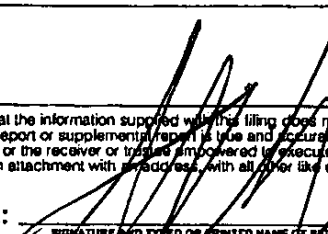


FILED
Jun 12, 2007 8:00 am
Secretary of State

05-22-2007 90018 028 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P03000148190 1. Entity Name SCOTT P. CONLON ENTERPRISES INC.		
Principal Place of Business 2910 68TH AVENUE N.E. NAPLES, FL 34120	Mailing Address 2910 68TH AVENUE N.E. NAPLES, FL 34120	66018832 
DO NOT WRITE IN THIS SPACE		05012007 No Chg-P CR2E034 (11/05)
		4. FEI Number 65-1210345 Applied For <input type="checkbox"/> Not Applicable
DO NOT WRITE IN THIS SPACE		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent CONLON, SCOTT P 2910 68TH AVENUE N.E. NAPLES, FL 34120		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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST- ZIP	D CONLON, SCOTT P 2910 68TH AVENUE N.E. NAPLES, FL 34120	
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TITLE NAME STREET ADDRESS CITY-ST- ZIP		
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 my address, with all other like empowered.		
SIGNATURE:  Scott P Conlon 6/4/07 (239) 253-7589		Daytime Phone # _____