## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P04000001828

**FILED** Apr 10, 2007 8:00 am Secretary of State

04-10-2007 90021 006 \*\*\*150.00

FIDDLER'S CREEK PROPERTIES, INC.									
Principal Place of Business 8156 FIDDLER'S CREEK PARKWAY NAPLES, FL 34114		Mailing Address 8156 FIDDLER'S CREEK PARKWAY NAPLES, FL 34114			40055795				
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01052007	Chg-P	CR2E03	4 (12/06)	
City & State		City & State		¥ 70,	4. FEI Number 56-2424			-	plied For t Applicable
Zip	Country	Zip	Country	Country		of Status Desired		8.75 Add ee Require	
	6. Name and Address of Current	Registered Agent	Nam		7. Name and	Address of New	Registered A	gent	
WOODWARD, MARK J 3200 TAMIAMI TRAIL NORTH STE 200 NAPLES, FL 34103					P.O. Box Numbe	r is Not Acceptab	ole)		
			City			41	FL	Zip Cod	е
	named entity submits this statement from of registered agent.  Signature, typed or printed name of registered agen		registered offic			n, in the State of F	Plorida. I am fa	miliar with,	and accept
FILI After Ma	E NOW!!! FEE IS \$150.00 ly 1, 2007 Fee will be \$550.	9. Election Campai Trust Fund Contr		\$5.	00 May Be ed to Fees				
10.	OFFICERS AND DIRECTORS				ADDITIONS/	CHANGES TO OF	FICERS AND		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DINARDO, ANTHONY 3470 CLUB CENTER BLVD NAPLES, FL 34114	☐ Delete	TITLE NAME STREET ADDRE CITY-ST-ZIP	815	6 Fiddle	r's Creek	. Parkwa	Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD PARISI, JOSEPH 3470 CLUB CENTER BLVD NAPLES, FL 34114	☐ Delete	TITLE  NAME  STREET ADDRE  CITY-ST-ZIP		6 Fiddle	r's Creek		Change Ly	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WOODWARD, MARK J 3200 TAMIAMI TRAIL N #200 NAPLES, FL 34103	☐ Delata	TITLE NAME STREET ADDRE CITY-ST-ZIP	ESS				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delate	TITLE NAME STREET ADDRI CITY-ST-ZIP	ESS		<u> </u>		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRI CITY-ST-ZIP	223				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	pertify that the information supplied wi	□ Delete	TITLE NAME STREET ADDRI CITY-ST-ZIP		Lin Chapter 110	Florido Status-	I further or "	Change	Addition

Interept certify that the information supplied with rins litting does not quality 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 expecte 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 applicass, with all other like empowered.

SIGNATURE:

STONE BY TEREPORT PRINTED THE OF EIGNING OFFICER OR DIRECTOR

2/1/07 (239) 732-9400

Dale

Daytime Phone #