


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 17, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # P04000048719  
 1. Entity Name  
 NAUTILUS STUDIOS, INC.



Principal Place of Business  
 1400 COLONIAL BLVD STE 58  
 FT MYERS, FL 33907

Mailing Address  
 1400 COLONIAL BLVD STE 58  
 FT MYERS, FL 33907



01102007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
 73-1699522

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

THOMAS, HUGH  
 1400 COLONIAL BLVD STE 58  
 FT MYERS, FL 33907

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

000000587744  
 01/17/07-80045-022 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	THOMAS, HUGH
STREET ADDRESS	1400 COLONIAL BLVD STE 58
CITY-ST-ZIP	FT MYERS, FL 33907
TITLE	D
NAME	THOMAS, SUSANNE
STREET ADDRESS	1400 COLONIAL BLVD STE 58
CITY-ST-ZIP	FT MYERS, FL 33907
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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 an address, with all other like empowered.

SIGNATURE:  HUGH THOMAS  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-07 239-275-7427  
Date Daytime Phone #