2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P04000077857

1. Entity Name MERCATO, INC.



FILED Apr 26, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

4200 GULF SHORE BLVD NORTH NAPLES, FL 34103

4200 GULF SHORE BLVD NORTH NAPLES, FL 34103



04122007

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-1134629

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CATALANO, ANTHONY

NO NOT WOITE

4001 TAMIAMI TRAIL NORTH SUITE 250 NAPLES, FL 34103				IN THIS SPACE		
	enamed entity submits this statement for the p tions of registered agent.	urpose of changing its regi	stered office or re	egistered agent, or bo	ith, in the State of Florida I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent and title in	applicable. (NOTE: Reg	stered Agent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign F Trust Fund Contribute		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
THILE NAME STREET ADDRESS CITY-ST-ZIP	PD LUTGERT, SCOTT F 4200 GULF SHORE BLVD. N. NAPLES, FL 34103					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD BAKER, RICHARD J 4200 GULF SHORE BLVD. N. NAPLES, FL 34103					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTSD GUTMAN, HOWARD B 4200 GULF SHORE BLVD. N. NAPLES, FL 34103			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN ⁻	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000733707 05/09/07-80096-017 150.00	

g does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information of accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information sup indicated on this report or supply of the corporation or the receiver changed, or on an attachment w er like empowered.

Howard B. Gutman

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

> Vice President AME OF SIGNING OFFICER OR DIRECTOR

4/13/07

(239) 261-6100

Daytime Phone #