

**\*2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 08, 2006 8:00 am**  
**Secretary of State**

05-08-2006 90281 037 \*\*\*150.00

**DOCUMENT # P04000085006**

1. Entity Name  
**GHR MANAGEMENT, INC.**



Principal Place of Business  
**12700 TAMiami TRAIL EAST  
PMB #203  
NAPLES, FL 34113-8431**

Mailing Address  
**12700 TAMiami TRAIL EAST  
PMB #203  
NAPLES, FL 34113-8431**

**40087080**



2. Principal Place of Business  
**921 MANATEE ROAD**  
Suite, Apt. #, etc.

3. Mailing Address  
**921 MANATEE ROAD**  
Suite, Apt. #, etc.

04202006 Chg-P CR2E034 (11/05)

City & State  
**NAPLES, FL**

City & State  
**NAPLES, FL**

4. FEI Number  
**51-0511661**

Applied For  
Not Applicable

Zip  
**34114**

Country  
**USA**

Zip  
**34114**

Country  
**USA**

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

**6. Name and Address of Current Registered Agent**

**SAMOUCE, MURRELL & GAL, P.A.  
800 LAUREL OAK DRIVE  
SUITE 300  
NAPLES, FL 34108**

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**PTD  
RIDDELL, GILBERT H  
12700 TAMiami TRAIL EAST PMB #203  
NAPLES, FL 341138431** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**SVD  
RIDDELL, EILEEN E  
12700 TAMiami TRAIL EAST PMB #203  
NAPLES, FL 341138431** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
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TITLE  
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STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**921 MANATEE ROAD  
NAPLES, FL 34114** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**921 MANATEE ROAD  
NAPLES, FL 34114** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
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CITY - ST - ZIP  
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NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

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:**

**GILBERT H. RIDDELL**

**4/25/06 (239) 775-2999**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #