2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # POZODORGES

FILED Mar 19, 2008 8:00 am Secretary of State 03-19-2008 90018 043 ***150.00

| 1. Entity Name BATEMAN CONSULTANTS OF NAPLES, INC. | | | | | | | | | | |
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| Principal Place of Business 2245 VENETIAN CT BLDG 4 NAPLES, FL 34109 | | | Mailing Address 2245 VENETIAN CT BLDG 4 NAPLES, FL 34109 | | | 40 | 40048781 | | | |
| 2. Principal Place of Business - No P.O. Box # 7869 Hawthorne Drive | | | 3. Mailing Address P.O. Box 12169 | | | | | | | |
| Suite, Apt. #, etc. # 302 | | | Suite, Apt. #, etc. | | | 03042008 | Chg-P | CR2E034 (12/06 | } | |
| City & State Naples, FL | | Naples, FL | | | 4. FEI Num 20-12 | ger 36960 | | pplied For lot Applicable | | |
| Zip 34113 | | U.S.A. | 34101 | U.S. | | | e of Status Desired | S8.75 Ac Fee Requir | | |
| 6. Name and Address of Current Registered Agent Name | | | | | | | d Address of New R | egistered Agent | | |
| BATEMAN ARTHUR! Batema | | | | | | <u>nan, Arthu</u> | | | | |
| 2245 VENETIAN CT BLDG 4 NAPLES. FL 34109 | | | | | Street Address (P.O. Box Number is Not Acceptable) 7869 Hawthorne Drive | | | | | |
| NAPLES, F | -L 34109 | 1 | | | Suite # 302 | | | | | |
| | | | | | City Nap1e | es | | FL 3419 | de .3 | |
| | | ty submits this statement for | or the purpose of changing | j its registere | ed office or re- | gistered agent, or b | oth, in the State of Flo | rida. I am familiar witl | , and accept | |
| the obligations of registered agent. SIGNATURE Signature, typedox printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | | | | | | | | | | |
| | | | | | | | | | | |
| | | FEE IS \$150.00 18 Fee will be \$550. | 9. Election Car Trust Fund (| | ocing | \$5.00 May Be Added to Fees | | - | | |
| After Ma | ay 1, 200 | | OO Trust Fund (| Contribution. | | Added to Fees ADDITION | S/CHANGES TO OFF | ICERS AND DIRECTO | | |
| After Ma | PTS | OFFICERS AND | 00 Trust Fund (| 2001 Dontribution. | | Added to Fees ADDITION PTS | | ICERS AND DIRECTO | | |
| After Ma | PTS BATEMA | 8 Fee will be \$550. | OO Trust Fund (| 11. | I I | Added to Fees ADDITION PTS Bateman, A | | (X) Change | | |
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receive density 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 of 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 all address, with all other like empowered.