2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 30, 2007 8:00 am Secretary of State **DOCUMENT # P04000138390** 04-30-2007 90395 016 ***158.75 STEVEN CORPORATION OF NAPLES, INC. Mailing Address Principal Place of Business 6635 WILLOW PARK DR. **5475 LEE STREET** NAPLES, FL 34109 **UNIT 303** LEHIGH ACRES, FL 33971 3. Mailing Address 2. Principal Place of Business - No P.O. Box # 5580 8th Street West 5580 8th Street West Suite, Apt. #, etc. 6 17 Suite, Apt. #, etc. CR2E034 (12/06) 04252007 Chg-P Sulte City & State Lehish Acres, FL Applied For 4. FEI Number City & State Aures, 41-2154607 Not Applicable Country USA \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DEANGELIS, JOHN M 6635 WILLOW PARK DRIVE NAPLES, FL 34109 -1 ! 7 Zip Code 3397/ 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. Heyward Starling, President 4/24/07 (NOTE: Registered Agent signature reduced when reinstating) DATE SIGNATURE registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 SOFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Change ☐ Addition Delete TITLE TITLE NAME DEANGELIS, JOHN M NAME STREET ADDRESS 6635 WILLOW PARK DR. STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34109 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TOTLE 5580 8th street west ste 6 & 7 STARLING, HEYWARD B NAME NAME STREET ADDRESS STREET ADDRESS 6635 WILLOW PARK DR. Lehish Acres FL 33971 CITY ST-78 CITY-ST-ZIP NAPLES, FL 34109 ☐ Addition STD TITLE ☐ Delete TITLE DIAMOND, DAVID B NAME NAME STREET ADDRESS 6635 WILLOW PARK DR. STREET ADDRESS NAPLES, FL 34109 CITY-ST-7IP CITY-ST-ZIP ☐1 Change ☐ Addition ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-7IP ☐ Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

THE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Heyward Starling 4/26/07

FILED