# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 27, 2006**
**Secretary of State**

DOCUMENT# P04000152520

**Entity Name:** ATS OF NAPLES, INC.

**Current Principal Place of Business:**

7342 STONEGATE DRIVE
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

7342 STONEGATE DRIVE
NAPLES, FL 34109

**New Mailing Address:**

**FEI Number: 13-4291710** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STETLER, JOAN T
7342 STONEGATE DRIVE
NAPLES, FL 34109 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: STETLER, JOAN T
Address: 7342 STONEGATE DRIVE
City-St-Zip: NAPLES, FL 34109

Title: VP ( ) Delete
Name: ARCE, EFRAIN
Address: 3621 13TH AVENUE SW
City-St-Zip: NAPLES, FL 34117

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOAN T. STETLER P 04/27/2006

Electronic Signature of Signing Officer or Director Date