

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000096094

**FILED**  
**Apr 25, 2006**  
**Secretary of State**

**Entity Name:** EETESSAM PROPERTY MANAGEMENT CORP.

**Current Principal Place of Business:**

4325 TAMIAMI TRAIL NORTH  
NAPLES, FL 34103 US

**New Principal Place of Business:**

**Current Mailing Address:**

4325 TAMIAMI TRAIL NORTH  
NAPLES, FL 34103 US

**New Mailing Address:**

**FEI Number:** 51-0572340      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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

JENKINS, JENNIFER E RA  
4325 TAMIAMI TRAIL NORTH  
NAPLES, FL 34103 US

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: JENNIFER E. JENKINS      04/25/2006  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: EETESSAM, ALI M  
Address: 4325 TAMIAMI TRAIL NORTH  
City-St-Zip: NAPLES, FL 34103 US

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

Title: DR. (X) Change ( ) Addition  
Name: EETESSAM, ALI M  
Address: 4325 TAMIAMI TRAIL NORTH  
City-St-Zip: NAPLES, FL 34103 US

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: ALI M. EETESSAM      DR.      04/25/2006  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date