

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000147716

1. Entity Name
REFLECTIONS OF NAPLES, INC.



FILED

07 SEP 17 PM 3:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



08242007 Chg-P CR2E034 (12/06)

Principal Place of Business Mailing Address
DOCKSIDE BOARDWALK 1100 DOCKSIDE BOARDWALK 1100
6TH AVE S 6TH AVE S
NAPLES, FL 34102 NAPLES, FL 34102

2. Principal Place of Business - No P.O. Box # 3. Mailing Address
1170 3rd St. S. 1170 3rd St. S.

Suite, Apt. #, etc. Suite, Apt. #, etc.
B-105 B-105

City & State City & State
NAPLES, FL NAPLES, FL

Zip Country Zip Country
34102 Collier 34102 Collier

4. FEI Number Applied For
02-0757851 Not Applicable

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

6. Name and Address of Current Registered Agent

HARRIS, PENELOPE A
1100 6TH AVENUE SOUTH
SUITE 10
NAPLES, FL 34102

7. Name and Address of New Registered Agent

Name Larry R Harris
Street Address (P.O. Box Number is Not Acceptable)
1170 3rd St. S.
Suite B-105
City Naples FL Zip Code 34102

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 Larry Harris DATE 9/02/07
Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input type="checkbox"/> Delete	TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARRIS, LARRY		NAME	Harris, Larry	
STREET ADDRESS	DOCKSIDE BOARDWALK 1100 6TH AVE S		STREET ADDRESS	1170 3rd St. S. Suite B-105	
CITY-ST-ZIP	NAPLES, FL 34102		CITY-ST-ZIP	NAPLES, FL 34102	
TITLE	D	<input type="checkbox"/> Delete	TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARRIS, PENELOPE A		NAME	Harris, Penelope A	
STREET ADDRESS	DOCKSIDE BOARDWALK 1100 6TH AVE S		STREET ADDRESS	1170 3rd St. S. Suite B-105	
CITY-ST-ZIP	NAPLES, FL 34102		CITY-ST-ZIP	NAPLES, FL 34102	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 lines empowered.

SIGNATURE Larry Harris
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

File ☐ Cancel ☐ Amend ☐ Renew ☐ Other ☐