

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000017738

1. Entity Name

B & E ENTERPRISES OF NAPLES, INC.



Principal Place of Business

605 SQUIRE CIR.
202
NAPLES, FL 34104 US

Mailing Address

605 SQUIRE CIR.
202
NAPLES, FL 34104 US

2. Principal Place of Business - No P.O. Box #

227 MELROSE PL.

3. Mailing Address

227 MELROSE PL.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

NAPLES, FL

City & State

NAPLES, FL

Zip

34104

Country

USA

Zip

34104

Country

USA

07062007

Chg-P.

CR2E034 (12/06)

4. FEI Number

20-4238825

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WOODLEY, JERRY B
605 SQUIRE CIR.
#202
NAPLES, FL 34104

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**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

TITLE P ☐ Delete
NAME WOODLEY, JERRY B
STREET ADDRESS 605 SQUIRE CIR. #202
CITY-ST-ZIP NAPLES, FL 34104

TITLE VP ☐ Delete
NAME ALLEN, EMILY B
STREET ADDRESS 605 SQUIRE CIR. #202
CITY-ST-ZIP NAPLES, FL 34104

TITLE ☐ Delete
NAME *D 9/08*
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition
NAME WOODLEY, JERRY B.
STREET ADDRESS 227 MELROSE PL
CITY-ST-ZIP NAPLES, FL 34104

TITLE VP ☒ Change ☐ Addition
NAME ALLEN, EMILY B.
STREET ADDRESS 227 MELROSE PL
CITY-ST-ZIP NAPLES, FL 34104

TITLE ☐ Change ☐ Addition
NAME 300109696052
STREET ADDRESS 09/20/07--01019--023 **150.00
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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.

SIGNATURE:

J. Brett Woodley J. BRETT WOODLEY

9/9/07 239-248-4820

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #