


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 27, 2007 8:00 am
Secretary of State

08-27-2007 90032 041 ***150.00

DOCUMENT # P06000054249					
1. Entity Name SUPER 8 OF NAPLES/MARCO ISLAND, INC.					
Principal Place of Business 1155 BLUEHILL CREEK DR MARCO ISLANDS, FL 34145		Mailing Address 1155 BLUEHILL CREEK DR MARCO ISLANDS, FL 34145			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 43-1724226	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROATH, JAMES R 1155 BLUEHILL CREEK DR MARCO ISLAND, FL 34145				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 _____ <small>Signature, typed or printed name of registered agent and state if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____					
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ROATH, JAMES R		NAME		
STREET ADDRESS	1155 BLUEHILL CREEK DR		STREET ADDRESS		
CITY- ST- ZIP	MARCO ISLANDS, FL 34145		CITY- ST- ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ROATH, SAUNDRA		NAME		
STREET ADDRESS	1155 BLUEHILL CREEK DR		STREET ADDRESS		
CITY- ST- ZIP	MARCO ISLANDS, FL 34145		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		
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CITY- ST- ZIP			CITY- ST- ZIP		
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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 information empowered					
SIGNATURE: <i>James R. Roath</i>			8-20-07 2393891646		
Typed or printed name of signing officer or director			Date Daytime Phone #		