


**2005 FOR PROFIT CORPORATION
-ANNUAL REPORT**

FILED
Mar 03, 2005 08:00 AM
Secretary of State

DOCUMENT # P92000011329

1. Entity Name
BENJAMIN OF NAPLES, INC.



Principal Place of Business: 3033 RIVIERA DR. NAPLES, FL 34103 US

Mailing Address: 3033 RIVIERA DRIVE SUITE 201 NAPLES, FL 34103 US

DO NOT WRITE IN THIS SPACE



02252005 No Chg-P CR2E034 (10/03)

4. FEI Number: 65-0434482 Applied For: Not Applicable

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

6. Name and Address of Current Registered Agent

BUDD, DAVID G
3033 RIVIERA DRIVE
SUITE 201
NAPLES, FL 34103

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IN THIS SPACE**

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: _____ (NOTE: Registered Agent signature required when re-registering) DATE: _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	RUBIN, BENJAMIN
STREET ADDRESS	3033 RIVIERA DRIVE, SUITE 201
CITY-ST-ZIP	NAPLES, FL 34103
TITLE	V
NAME	BUDD, DAVID G.
STREET ADDRESS	3033 RIVIERA DRIVE, SUITE 201
CITY-ST-ZIP	NAPLES, FL 34103
TITLE	VAS
NAME	RUBIN, LINDA
STREET ADDRESS	3033 RIVIERA DR STE 201
CITY-ST-ZIP	NAPLES, FL 34103
TITLE	TS
NAME	RUBIN, HARRY
STREET ADDRESS	3033 RIVIERA DR STE 201
CITY-ST-ZIP	NAPLES, FL 34103
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: David G. Budd 2/28/05 (239) 263-7700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

DAVID G. BUDD, VICE PRESIDENT