

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000024577

FILED  
Mar 18, 2011  
Secretary of State

**Entity Name:** GOODLETTE OFFICE CORPORATION

**Current Principal Place of Business:**

3606 ENTERPRISE AVENUE  
NAPLES, FL 34104 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 8537  
NAPLES, FL 34101

**New Mailing Address:**

**FEI Number:** 65-0400349

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NOVATT, JEFF M ESQ.  
821 FIFTH AVENUE SOUTH  
SUITE 201  
NAPLES, FL 34102 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: BARBER, DONALD R  
Address: 3606 ENTERPRISE AVENUE  
City-St-Zip: NAPLES, FL 34104

Title: DCOB  
Name: BORAN, MICHAEL J  
Address: 3606 ENTERPRISE AVENUE  
City-St-Zip: NAPLES, FL 34104

Title: DVP  
Name: ENGEL, MELVIN L JR.  
Address: 3606 ENTERPRISE AVENUE  
City-St-Zip: NAPLES, FL 34104

Title: VP  
Name: CRAIG, RICHARD D  
Address: 3606 ENTERPRISE AVENUE  
City-St-Zip: NAPLES, FL 34104

Title: TS  
Name: BUNNELL, JAMES F  
Address: 3606 ENTERPRISE AVENUE  
City-St-Zip: NAPLES, FL 34104

I hereby 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 all other like empowered.

SIGNATURE: DEAN PREVOLOS

MGR

03/18/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date