

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 24, 2008 08:00 AM
Secretary of State

DOCUMENT # P93000079975

1. Entity Name
VERLO OF NAPLES, INC.



Principal Place of Business
**10981 HARMONY PARK DR#1
BONITA SPRINGS, FL 34135 US**

Mailing Address
**10981 HARMONY PARK DR#1
BONITA SPRINGS, FL 34135 US**



02132008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0450029

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BUCZKO, ROBERT J
428 PERSIAN CT
MARCO ISLAND, FL 34145**

**DO NOT WRITE
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 _____

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
After May 1, 2008 Fee will be \$550.00**

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

**U000000868504
04/09/08-80012-015 150.00**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME BUCZKO, ROBERT J
STREET ADDRESS 428 PERSIAN CT
CITY-ST-ZIP MARCO ISLAND, FL 34145

TITLE DV
NAME BUCZKO, BRIAN J
STREET ADDRESS 2380 LEAFSHINE LANE
CITY-ST-ZIP NAPLES, FL 34119

TITLE STD
NAME BUCZKO, MARGARET M
STREET ADDRESS 428 PERSIAN CT
CITY-ST-ZIP MARCO ISLAND, FL 34145

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Corporation Filing #

2-24-08