

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000034314

FILED  
Mar 31, 2007  
Secretary of State

Entity Name: NAPLES EXECUTIVE SUITES, INC.

## Current Principal Place of Business:

5100 NORTH TAMIAMI TRAIL  
SUITE 106  
NAPLES, FL 33940

## New Principal Place of Business:

## Current Mailing Address:

5100 NORTH TAMIAMI TRAIL  
SUITE 106  
NAPLES, FL 33940

## New Mailing Address:

FEI Number: 65-0492650

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZIRILLI, ANTHONY C  
5100 TAMIAMI TRAIL N. #206  
NAPLES, FL 34103 US

## Name and Address of New Registered Agent:

ALDRIDGE, PETER B  
5100 TAMIAMI TRAIL N. #206  
NAPLES, FL 34103 US

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: PETER B. ALDRIDGE

03/31/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ZIRILLI, ANTHONY C  
Address: 5100 TAMIAMI TRAIL NORTH, STE 106  
City-St-Zip: NAPLES, FL 34103

Title: D ( ) Delete  
Name: ZIRILLI, DAVID  
Address: 5100 TAMIAMI TRAIL NORTH, STE 106  
City-St-Zip: NAPLES, FL 34103

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: COYLE, JOHN L  
Address: 5100 TAMIAMI TRAIL NORTH, STE 106  
City-St-Zip: NAPLES, FL 34103

Title: D (X) Change ( ) Addition  
Name: ALDRIDGE, PETER B  
Address: 5100 TAMIAMI TRAIL NORTH, STE 106  
City-St-Zip: NAPLES, FL 34103

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: PETER B. ALDRIDGE

D

03/31/2007

Electronic Signature of Signing Officer or Director

Date