2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000046853

Entity Name: CAPRICCIO OF NAPLES, INC.

FILED Mar 15, 2009 Secretary of State

Current Principal Place of Business:

2344 PINE RIDGE ROAD
NAPLES, FL 34109 US

501 GOODLETTE ROAD, STE B-204 NAPLES, FL 34102

FEI Number: 65-0500766 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CONIGLIARO, JOE 2344 PINE RIDGE ROAD NAPLES, FL 33942 US

Current Mailing Address:

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

New Mailing Address:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD () Delete Title: PTSD (X) Change () Addition CONIGLIARO, JOE CONIGLIARO, JOSEPH Name: Name: 2344 PINE RIDGE ROAD 2344 PINE RIDGE ROAD Address: Address: City-St-Zip: NAPLES, FL 33942 City-St-Zip: NAPLES, FL 33942

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 CONITGLIARO, GIOVANNI
 Name:
 CONIGLIARO, GIOVANNI

 Address:
 2344 PINE RIDGE ROAD
 Address:
 2344 PINE RIDGE ROAD

 City-St-Zip:
 NAPLES, FL 34109
 City-St-Zip:
 NAPLES, FL 34109

I hereby certify that the information supplied with this filing does not qualify 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: JOSEPH CONIGLIARO P 03/15/2009