

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000057323

Entity Name: NAPLES AIR CENTER, INC.

FILED  
May 26, 2005  
Secretary of State

**Current Principal Place of Business:**

230 AVIATION DRIVE SOUTH  
NAPLES, FL 34104 US

**New Principal Place of Business:**

**Current Mailing Address:**

230 AVIATION DRIVE SOUTH  
NAPLES, FL 34104 US

**New Mailing Address:**

FEI Number: 65-0507824      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

COLGROVE, JACOB  
1570 SHADOWLAWN DR  
NAPLES, FL 34104 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: GENTIL, RICHARD J  
Address: 2190-D ANCHORAGE LN  
City-St-Zip: NAPLES, FL 34104

Title: V ( ) Delete  
Name: GENTIL, NICOLA  
Address: 2190-D ANCHORAGE LN  
City-St-Zip: NAPLES, FL 34104

Title: S ( ) Delete  
Name: WITT, RUSSEL L  
Address: 2901 47TH TERRACE S.W.  
City-St-Zip: NAPLES, FL 34116

Title: T ( ) Delete  
Name: IRVINE, JOHN J  
Address: 943 SAPLING DRIVE  
City-St-Zip: NAPLES, FL 34120

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD J. GENTIL

DP

05/26/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date