2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2006
Secretary of State

DOCUMENT# P95000007553

Entity Name: D & J OF NAPLES, INC.

Current Principal Place of Business:

3517 DORA ST
FORT MYERS, FL 33916 US

New Principal Place of Business:

Current Mailing Address:

3517 DORA ST
FORT MYERS, FL 33916 US

New Mailing Address:

FEI Number: 65-0551482 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GARGIULO, JAMES
3517 DORA STREET
FORT MYERS, FL 33916 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: DIDONNA, DENNIS
Address: 1817 PRINCESS CT.
City-St-Zip: NAPLES, FL 34810

Title: DP ( ) Delete
Name: GARGIULO, JAMES
Address: 11238 FIVE OAKS LN.
City-St-Zip: NAPLES, FL 34120

Title: VP ( ) Delete
Name: PURDY, WILLIAM
Address: 8901 CYPRESS PRESERVE PLACE
City-St-Zip: FT. MYERS, FL 33912

Title: T ( ) Delete
Name: O'LEARY, PATRICIA
Address: 17033 GOLFSIDE CIRCLE #502
City-St-Zip: FT. MYERS, FL 33908

Title: DS ( ) Delete
Name: MCARDLE, MICHAEL
Address: 771 FIFTH AVE. SOUTH # 209
City-St-Zip: NAPLES, FL 34102

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: T (X) Change ( ) Addition
Name: MASON, PATRICIA D
Address: 848 GLENCOE ST. E
City-St-Zip: LEHIGH ACRES, FL 33936

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 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: JAMES GARGIULO DP 01/10/2006

Electronic Signature of Signing Officer or Director Date