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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State-

1996 DIVISION OF CORPORATIONS							
DOCUMENT # P95000012271 (9) 1. Corporation Name							
	OF NAPLES, INC.				A ERRAIDES BAR LONER BINI ABIN AD	14 00 110 00 101 11 1	EO DÍANO HIGH HAGA HAGA ÉBAN
Original Place	of Business	Mailing Address					
Principal Place of Business 229 7TH AVE. SOUTH NAPLES FL 33940		229 7TH AVE. SOUTH NAPLES FL 33940					
					3. Date incorporated or Qualified 02/13/1995	3a. Date	of Last Report
¬ .	ace of Business	2a. Mailing Address	···		4. FET Number	l	Applied For
Coho Ao) H ete		Suite Act to alc		65-055 770	1	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State	е	Oity & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Z _{IP}	Country	[28]	Cou		8. This corporation has liability fo	r intangible ta	~
]	25	29	30	,	·	s ∐No	A tinder 6 130.002;
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New	Registered /	Agent
PEFLIFE	FER, WILLIAM A			81 Name			
1124 GOODLETTE ROAD					dress (P.O. Box Number is Not Accepta	nble)	
NAPLES	S FL 33940			83			
				84 City		FL	85 Zip Code
1. Pursuant or registe	to the provisions of Sections 607.05 red agent, or both, in the State of Flo	02 and 607,1508. Florida S orida. Such change was au	Statutes, the above thorized by the o	L ve-named corps responsition's be	oration submits this statement for the plant of directors. Thereby accept the ap		anging its registered offici registered agent. I am
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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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Sandra Jones Sandra Jones Signature and typed deprinted name of Signing Officer or Director

4716-96 (941)649-4441 S(-21-29-96