

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 05, 2004 8:00 am
Secretary of State

04-12-2004 90678 050 ***150.00

DOCUMENT # P97000057204 1. Entity Name KAMEN INVESTMENTS OF SOUTHWEST FLORIDA INC.					
Principal Place of Business 1076 INDUSTRIAL BLVD. NAPLES FL 34104			Mailing Address 1076 INDUSTRIAL BLVD. NAPLES FL 34104		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3460255	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NOURSE, MICHAEL E 5070 12TH AVE. S.W. NAPLES FL 34116				7. Name and Address of New Registered Agent Name Kathleen Molly Nourse Street Address (P.O. Box Number is Not Acceptable) 5080 Cedar Springs Drive #101 City Naples FL Zip Code 34110	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Kathleen Molly Nourse</i></u> 4-7-2004 Signature, typed or printed name of registered agent and then applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDTD NOURSE, MICHAEL E 5070 12TH AVE SW NAPLES FL	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Kathleen Molly Nourse 5080 Cedar Springs Dr. #101 Naples, FL 34110	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Joseph Patrick Nourse 8075 San Vista Circle Naples, FL 34109	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Mark Andrew Nourse 2632 Outrigger Lane Naples, FL 34104	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Michael Eugene Nourse, Jr. 2575 14th Street North Naples, FL 34103	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered					
SIGNATURE: <u><i>Michael E Nourse</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date <u>4/30/04</u> Daytime Phone # <u>239-262-7228</u>		

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MOORE CR2E034 (11/03)