

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000057204

FILED
Jan 18, 2006
Secretary of State

Entity Name: KAMEN INVESTMENTS OF SOUTHWEST FLORIDA INC.

Current Principal Place of Business:

1076 INDUSTRIAL BLVD.
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

127 WILLOUGHBY DR
NAPLES, FL 34110

New Mailing Address:

FEI Number: 59-3460255

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOURSE, KATHLEEN M
127 WILLOUGHBY DR
NAPLES, FL 34110 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: NOURSE, KATHLEEN M
Address: 127 WILLOUGHBY DR
City-St-Zip: NAPLES, FL 34110

Title: D () Delete
Name: NOURSE, JOSEPH P
Address: 8075 SNA VISTA CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: NOURSE, MARK A
Address: 2632 OUTRIGGER LANE
City-St-Zip: NAPLES, FL 34104

Title: D () Delete
Name: NOURSE, MICHAEL E JR
Address: 2575 14TH STREET NORTH
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NOURSE, KATHLEEN M
Address: 127 WILLOUGHBY DR
City-St-Zip: NAPLES, FL 34110

Title: D (X) Change () Addition
Name: NOURSE, JOSEPH P
Address: 8075 SAN VISTA CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: D (X) Change () Addition
Name: NOURSE, MARK A
Address: 1055 ROYAL PALM DRIVE
City-St-Zip: NAPLES, FL 34013

Title: D (X) Change () Addition
Name: NOURSE, MICHAEL E JR
Address: 1361 26TH AVENUE NORTH
City-St-Zip: NAPLES, FL 34103

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: KATHLEEN MOLLY NOURSE

P

01/18/2006

Electronic Signature of Signing Officer or Director

Date