

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2007 8:00 am
Secretary of State

03-15-2007 90029 035 ***150.00

DOCUMENT # P97000079819

1. Entity Name

THE TRADEWELL GROUP, INC.



Principal Place of Business

1040 MORNINGSIDE DR
NAPLES FL 34103
US

Mailing Address

P.O. BOX 2725
NAPLES FL 34106
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number 59-3466722

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CANT, JOSEPH R
1040 MORNINGSIDE DR
NAPLES FL 34103

Name

N/A SAME

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 N/A SAME

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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 D ☐ Delete
NAME CANT, JOSEPH R
STREET ADDRESS 1040 MORNINGSIDE DRIVE
CITY- ST- ZIP NAPLES FL 34103

TITLE ☒ Change ☐ Addition
NAME President
NAME Gary M. Wilson
STREET ADDRESS 1040 Morningside Dr.
CITY- ST- ZIP Naples, FL 34103

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY- ST- ZIP ☐ Delete

TITLE ☒ Change ☐ Addition
NAME Secretary/Treas/
NAME Joseph R. Cant
STREET ADDRESS 1040 Morningside Drive
CITY- ST- ZIP Naples, FL 34103

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY- ST- ZIP ☐ Delete

TITLE ☒ Change ☐ Addition
NAME Vice President
NAME Joseph R. Cant
STREET ADDRESS 1040 Morningside Drive
CITY- ST- ZIP Naples, FL 34103

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY- ST- ZIP ☐ Delete

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY- ST- ZIP ☐ Delete

TITLE ☐ Change ☒ Addition
NAME Director
NAME Gary M. Wilson
STREET ADDRESS 1040 Morningside Drive
CITY- ST- ZIP Naples, FL 34103

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY- ST- ZIP ☐ Delete

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

Vice President

New President

SIGNATURE: Joseph R. Cant

Gary M. Wilson

02/21/07

239285-1556

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Leaving Phone #