

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 04, 2005 8:00 am**  
**Secretary of State**

03-04-2005 90066 033 \*\*\*158.75

**DOCUMENT # P98000059339**

1. Entity Name  
**CAPSTONE VENTURES, INC.**



Principal Place of Business  
**22011 PALM BEACH BLVD  
ALVA, FL 33920**

Mailing Address  
**22011 PALM BEACH BLVD  
ALVA, FL 33920**

10000010



2. Principal Place of Business

**1503 Lily Pond Ct**

3. Mailing Address

**1503 Lily Pond Ct**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01102005

Chg-P

CR2E034 (10/03)

City & State

**FORT MYERS FL**

City & State

**FORT MYERS FL**

Zip

**33901**

Country

**USA**

Zip

**33901**

Country

**USA**

4. FEI Number

**65-0864277**

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**JONES, GREGORY H  
22011 PALM BEACH BLVD  
ALVA, FL 33920**

**1503 Lily Pond Ct  
FORT MYERS, FL 33901**

7. Name and Address of New Registered Agent

Name

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
JONES, GREGORY H  
22011 PALM BEACH BLVD  
ALVA, FL 33920** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
Gregory H Jones  
1503 Lily Pond Court  
FORT MYERS, FL 33901** ☒ Change ☐ Addition

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

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

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

TITLE  
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CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**2-28-2005**

**239/728-2189**