2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 03, 2006 8:00 am Secretary of State 03-03-2006 90094 016 ***150.00

DOCUMENT # P98000101421 1. Entity Name BATEMAN & MARTIN DEVELOPMENTS, INC.						03-03-2006 90094 016 ***150.00				
Principal Place 4770 ALBER #2602 NAPLES, FL	TON COURT 34105 US	Mailing Address 4770 ALBERTON COU #2602 NAPLES, FL 34105			<u>/</u> 	10022 				
2. Principal Place of Business 2245 Venetian Court 2245 Venetian				Court						
Suite Apt. Buildi		Suite Apt, #, etc. Building 4				02212006	Chg-P	CR2E034	<u> </u>	
City & State Naples	, FL	City & State Naples, FL	Naples, FL			4. FEI Number 59-354				Applicable
Zip 34109 Country USA		34109	Zio 34109 USA		5. Certificate of Status Desire			\$8.75 Additional Fee Required		
		7. Name and Address of New Registered Agent Name								
BATEMAN 4770 ALBE		Bateman, Arthur L. Street Address (P.O. Box Number is Not Acceptable) 2245 Venetian Court								
#2602 NAPLES, F		Building 4								
		City N	Naples FL Zip Code 34109							
8. The above named suffly 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 required when rematating) DATE										
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.										
10.	OFFICERS AN	D DIRECTORS	11.			ADDITIONS	CHANGES TO OF		DIRECTORS THE Change	IN 11
NAME STREET ADDRESS CITY-ST-ZIP	BATEMAN, ARTHUR L 4770 ALBERTON COURT, #26 NAPLES, FL 34105	NAM STRE	IE EFT ADORESS		2245 Venetian Court, Building 4 Naples, FL 34109					
TITLE	D D	☐ Delete	fitL	E		·····			K Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	MARTIN, DAN 5222 KENSINGTON HIGH ST. NAPLES, FL 34105		EET ADDRESS		45 Venetian Court, Building 4 ples, FL 34109					
TITLE NAME		☐ Delete	TITE			<u> </u>			☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP	IEET ADURESS									
NAME STREET ADDRESS CITY-ST-ZIP		☐ Detete		I					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		- 1					☐ Change	Addition
TITLE	Service Services Services	☐ Delete	TITL			· · · · · · · · · · · · · · · · · · ·			☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP	ុស្ស ខេត្ត 🐰 🥡		CIT	LEÉT ADDRESS Y-ST-ZIP	\$	•		· · · · · · · · · · · · · · · · · · ·		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or suppliemental upon 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 occupation or the receiver or trustife empowered to execute this empowered. SIGNATURE: (239)430-1012										
SIGNAT	TURE: SIGNATURE AND TYPED	OR PRINTED NAME OF SIGNING OFFIC	ER OR DIREC	TOR ROTT		2-	0 5 7 0 Co		syteme Phone I	1-1012