## **2007 FOR PROFIT CORPORATION**

**ANNUAL REPORT** 

DOCUMENT # P98000104490

TAMÉRON, INC.



Principal Place of Business

SIGNATURE:

4200 GULF SHORE BLVD. NORTH NAPLES, FL 34103

Mailing Address

4200 GULF SHORE BLVD. NORTH NAPLES, FL 34103

**FILED** Apr 26, 2007 08:00 AM Secretary of State

Applied For



DO NOT WRITE IN THIS SPACE

No Chg-P CR2E034 (11/05)

4.	FEI Number		Applied
	NOT APPLICABLE		Not App
5.	Certificate of Status Desired	\$8.7 Fee Re	5 Additional equired

(239) 261-6100

Daytime Phone #

4/13/07

Dale

6. Name and Address of Current Registered Agent

CATALANO, ANTHONY J 4001 TAMIAMI TRAIL NORTH STE. 250 NAPLES, FL 33940

## DO NOT WRITE IN THIS SPACE

			;		
the obligat	named entity submits this statement for the pions of registered agent.	urpose of changing its re	gistered office or r	egistered agent, or bo	oth, in the State of Florida. If am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title i	fapplicable (NOTE: R	Registered Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign     Trust Fund Contrib	~	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LUTGERT, SCOTT F 4200 GULF SHORE BLVD N NAPLES, FL 34103				U00000733913 05/09/07-80105-015 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BAKER, RICHARD J 4200 GULF SHORE BLVD N NAPLES, FL 34102				02/02/07-80102-012 12 <b>0.</b> 00
NAME STREET ADDRESS CITY-ST-ZIP	V GUTMAN, HOWARD B 4200 GULFSHORE BLVD N NAPLES, FL 34103			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby of indicated of the cor changed.	certify that the information supplies with using an initial report or supplier ental report is rule apporation or the receiver of master empowers or on an attachment with an appress, with an appress of the control of	ing does not qualify for the accurate and that my doexecute this report as other like empowered.	he exemptions cor signature shall hav required by Chap		9. Fiorida Statutes. I further certify that the information of as if made under oath; that I am an officer or directories; and that my name appears in Block 10 or Block 11 if

Howard B. Gutman

Vice President

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR