

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 17, 2006 8:00 am**  
**Secretary of State**

02-17-2006 90075 012 \*\*\*150.00

<b>DOCUMENT # P99000029519</b> 1. Entity Name <b>DAVID KERLEK ENTERPRISES, INC.</b>			
Principal Place of Business <b>597 LAKELAND AVE. NAPLES, FL 34110</b>		Mailing Address <b>597 LAKELAND AVE. NAPLES, FL 34110</b>	
2. Principal Place of Business <b>342 Trade Winds Ave E</b>		3. Mailing Address <b>342 Trade Winds Ave "E"</b>	
Suite, Apt. #, etc. <b>1</b>		Suite, Apt. #, etc. <b>1</b>	
City & State <b>Naples, FL</b>		City & State <b>Naples, FL</b>	
Zip <b>34108</b>		Zip <b>34108</b>	
Country <b>USA</b>		Country <b>USA</b>	
4. FEI Number <b>52-2158503</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>KERLEK, DAVID 597 LAKELAND AVE NAPLES, FL 34110</b>		7. Name and Address of New Registered Agent Name <b>DAVID KERLEK</b> Street Address (P.O. Box Number is Not Acceptable) <b>342 Trade Winds Ave E</b> City <b>Naples</b> <b>FL</b> Zip Code <b>34108</b>	
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 <i>[Signature]</i> <b>(Change of Address/office)</b> DATE <b>2/7/06</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KERLEK, DAVID C 597 LAKELAND AVE. NAPLES, FL 34110	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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: <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <b>2/7/06</b> Daytime Phone # <b>239-777-4357</b>	

**60018015**



02032006 Chg-P CR2E034 (11/05)

4. FEI Number **52-2158503** 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

KERLEK, DAVID  
597 LAKELAND AVE  
NAPLES, FL 34110

Name **DAVID KERLEK**  
Street Address (P.O. Box Number is Not Acceptable)

*Change of office  
Address only →*

**342 Trade Winds Ave E**  
City **Naples** **FL** Zip Code **34108**

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**FILE NOW!!! FEE IS \$150.00**  
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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PD  
KERLEK, DAVID C  
597 LAKELAND AVE.  
NAPLES, FL 34110

☐ Delete

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SIGNATURE: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **2/7/06** Daytime Phone # **239-777-4357**