

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S41636

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: MANGROVE COMPANIES LIMITED, INC.

## Current Principal Place of Business:

3737 DOMESTIC AVE  
#5A  
NAPLES, FL 34104 US

## New Principal Place of Business:

1145 WHIPPOORWILL LANE  
NAPLES, FL 34105 US

## Current Mailing Address:

3737 DOMESTIC AVE  
#5A  
NAPLES, FL 34104 US

## New Mailing Address:

1145 WHIPPOORWILL LANE  
NAPLES, FL 34105 US

FEI Number: 65-0298869      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DELLECAVE, STEVEN F. PRES  
1145 WHIPPOORWILL LANE  
NAPLES, FL 34105 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PC ( ) Delete  
Name: DELLECAVE, STEVEN F PRES  
Address: 3737 DOMESTIC AVE #5A  
City-St-Zip: NAPLES, FL 34104

Title: V ( ) Delete  
Name: SCHEREN, FRANK J  
Address: 3737 DOMESTIC AVE #5A  
City-St-Zip: NAPLES, FL 34104

Title: S ( ) Delete  
Name: SLAPPEY, TOMMY  
Address: 3737 DOMESTIC AVE #5A  
City-St-Zip: NAPLES, FL 34104

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change ( ) Addition  
Name: DELLECAVE, STEVEN F PRES  
Address: 1145 WHIPPOORWILL LANE  
City-St-Zip: NAPLES, FL 34105

Title: V (X) Change ( ) Addition  
Name: SCHEREN, FRANK J  
Address: 1145 WHIPPOORWILL LANE  
City-St-Zip: NAPLES, FL 34105

Title: S (X) Change ( ) Addition  
Name: SLAPPEY, TOMMY  
Address: 1145 WHIPPOORWILL LANE  
City-St-Zip: NAPLES, FL 34105

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN F. DELLECAVE

PRES

04/28/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date