2005 FOR PROFIT CORPORATION

Mar 25, 2005 8:00 am ANNUAL REPORT **Secretary of State DOCUMENT # S86041** 03-25-2005 90039 049 ***150.00 SWALM, BOURGEAU & DAVIES, P.A. Principal Place of Business Mailing Address 50030652 2375 TAMIAMI TRAIL NORTH 2375 TAMIAMI TRAIL NORTH SUITE 308 SUITE 308 NAPLES, FL 34103 NAPLES, FL 34103 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02132005 Cha-P CR2E034 (10/03) City & State Applied For City & State 4. FEI Number 65-0288258 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required -6.-Name and Address of Current Registered Agent == 7.-Name and Address of New Registered Agent-----CHRISTSPHER SWALM, JOHN M. III Street Address (P.O. Box Number is Not Acceptable) 2375 TAMIMMI TOAIL 2375 TAMIAMI TRAIL NORTH **SUITE 308** NAPLES, FL 33940 City NAPLED Zip Code 3 4 (% 3 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 ager CHRISTOPHER N. DAVIES (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 П Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. Delete TITLE TITLE PRESIDENT Change ■ Addition DAND C. BUVLGEAU SWALM, III, JOHN M NAME NAME NORTH # 308 2375 TAMIAMI TRAIL STREET ADDRESS 2375 TAMIAMI TRAIL NORTH, SUITE 308 STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34103 CITY+ST-ZIP TREMITAR TITLE **ZN**Oelete TITLE Change Addition CHRISTOPHER NO BOURGEAU, DAVID C NAME NAME 2375 TAMIAMI TRAIL #308 NOXIN # 308 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34103 CITY-ST-ZIP ST M Delete TITLE ☐ Change ☐ Addition SWALM III, JOHN MARKE NAME STREET ADDRESS 2375 TAMIAMI TRAIL #308 STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34103 CITY-ST-ZIP TITLE Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-7IP CITY-ST-7P

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 cath; 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 attackment with an address, with all other like empowered.

TITLE

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NAME

STREET ADDRESS CITY-ST-7/P

STREET ADDRESS

DAWS C. Boungeau SIGNATURE: 4

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