SPB OF NAPLES, INC.       01-24-2002 90330 001 ***793.75         Principal Place of Business       Maling Address         Suffer 203       NAPLES FL 34108         2. Principal Place of Business       3. Maling Address         Suffer 203       NAPLES FL 34108         2. Principal Place of Business       3. Maling Address         Suffer Apt. #, etc.       Suffer Apt. #, etc.         City & State       4. FEI Number 65-0360258         Z/p       Country         Zip       Country         State       1. Name and Address of Status Desired         ATHAN, G H         State Status       State City & State         ATHAN, G H         State Status       City Graphic Fr.         State Status       City City City         State Status       City City City         State Status       City City City         State Status       City City         Status       City City City         State Status       City City City         Status       City City City         Status       City City City City         Status       City City City City City City City City		MENT # <b>V6678</b>	1	Jan 24, 2002 8:00 am Secretary of State		
SSS1 RIDGEWOOD DRIVE SUITE 203 NAPLES FL 34108       SSS1 RIDGEWOOD DRIVE SUITE 203 NAPLES FL 34108       SUITE 203 NAPLES FL 34108       SUITE 203 NAPLES FL 34108         2. Principal Place of Business       3. Mailing Address       Suite, Apt. #, etc.       DD NOT WRITE IN THIS SPACE         City & State       City & State       4. FEI Number 65-0360258       Applied FC         Zip       Country       Zip       Country       S. Certificate of Status Desired       State Status Desired         ATHAN, G H       Street Address of Current Registered Agent       7. Name and Address of New Registered Agent       7. Name and Address of New Registered Agent         ATHAN, G H       Street Address (P.O. Box Number is Not Acceptable)       Street Address (P.O. Box Number is Not Acceptable)         Street Address (P.O. Box Number is Not Acceptable)       DTE       City Code         8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.       Street Address (P.O. Box Number is Not Acceptable)         Street Address Street Address of Desires Apent agence required agent, or both, in the State of Florida.       Street Address (P.O. Box Number is Not Acceptable)         Street Address Street Address of Power Registered Agent agence required agent, or both, in the State of Florida.       Street Address (P.O. Box Number is Not Acceptable)         Street Address Street Address of Power Registered Agent agence required Agent agence required agent, or both,	•	ne				
2. Principal Place of Eusiness     3. Maling Address     5. Certificate of Status Desired     5. Certificate of Status Desired Agent     7. Name and Address of New Registered Agent     7. Name and Address     7. Name and Address of New Registered Agent     7. Name and Address of New Registered Agent     7. Name and Address of New Registered Agent     7. Name and Address     7. Name and Addr	5551 RIDGEWO SUITE 203	OOD DRIVE	5551 RIDGEWOOD DRIVE SUITE 203	:		
City & State       City & State       4. FEI Number       65-0360258       Applied Fr.         Zip       Country       Zip       Country       s. Certificate of Status Desired       Cord       Status Desired       Status Desired       Status Desired       Status Desired       Status Desired	2. Principal P	lace of Business	3. Mailing Address			<b>j</b> i
Zip     Country     Zip     Country     S. Certificate of Status Desired     S8.75       AttHAN, G H     Status Desired     S. Certificate of Status Desired     S8.75     Additional Fee Required       ATHAN, G H     Street Address of New Registered Agent     7. Name and Address of New Registered Agent     Street Address       STE #501     NAPLES FL 34108     City     FL     Zip Code       8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.     City     FL     Zip Code       SIGNATURE     Signature toget or orified name of registered agent and the Lapatcable     (HOTE Regetered Agent signature required when reinstateq)     DATE       9. This corporation is eligible to satisfy its intangible Tax filling requirement and elects to do so. (See criteria on back)     FILE NOW!!! FEE IS \$150.00 Make Check Payable to Department of State     10. Election Campaign Financing Trust Fund Contribution.     \$5,00 May i Added to Fees (Trust Fund Contribution.       11.     OFFICERS AND DIRECTORS     12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11       11.     OFFICERS AND DIRECTORS     12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11       11.     OFFICERS AND DIRECTORS     12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11       11.     OFFICERS AND DIRECTORS     12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11       11.     OFFICERS AND DIRECTORS     12. ADDITIONS	Suite, Apt.	#, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
	City & State	e	City & State		4. FEI Number 65-0360258 Applied For Not Applica	
ATHAN, G H         \$551 RIDGEWOOD DRIVE         STE #501         NAPLES FL 34108         B. 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         Signature, typed or primed name of registered agent and title if applicable.         (MOTE Registered Agent signature required when reinstalling)         DATE         9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back)       FILE NOW!!! FEE IS \$150.00 Make Check Payable to Department of State         11.       OFFICERS AND DIRECTORS       12.         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11       Change         ITTLE       DYS       CITY-ST-ZIP         NAPLES FL 33983       CITY-ST-ZIP         ITTLE       DVS       CITY-ST-ZIP         ITTLE       DVS       CITY-ST-ZIP         ITTLE       Delete       TITLE         NAPLES FL 33983       CITY-ST-ZIP         ITTLE       Delete       TITLE         NAPLES FL 33983       CITY-ST-ZIP	Zip	Country	Zip	Country		
S551 RIDGEWOOD DRIVE     Streef Address (P.O. Box Nullider is Not Address (P.O. Bo		6. Name and Address of Current I	Registered Agent	Name	7. Name and Address of New Registered Agent	
NAPLES FL 34108       City       FL       Zip Code         B. 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	5551 RIDGEWOOD DRIVE			Street Addre	ress (P.O. Box Number is Not Acceptable)	
B. 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   Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstaling)   DATE   9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)   10. Election Campaign Financing Trust Fund Contribution.   11.   OFFICERS AND DIRECTORS   12.   Added to Fees   13.   OFFICERS AND DIRECTORS   14.   OFFICERS AND DIRECTORS   12.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11   ITTLE   DTS   CORACE, RICHARD F   STREET ADDRESS   5551 RIDGEWOOD DR.   CITY-ST-ZIP   NAPLES FL 33963				City	Zip Code	$\neg$
Signature. typed or printed name of registered agent and title if applicable.       (NOTE: Registered Agent signature required when reinstating)       DATE         9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)       FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State       10. Election Campaign Financing Trust Fund Contribution.       \$5.00 May I Added to Fees         11.       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         11.       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         11.       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         11.       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         11.       DTS CORACE, RICHARD F 5551 RIDGEWOOD DR.       Intel E       Intel Intel NAME       Change       Add         11.       DVS STREET ADDRESS       CITY-ST-ZIP       Intel Intel       Change       Add         11.       GRIFFIN, GERALD F 5551 RIDGEWOOD DR.       Delete       Intle       Change       Add         11.       DVS STREET ADDRESS       CITY-ST-ZIP       Intle       Change       Add         11.       Belete       Intle       Delete       <	I. The above	named entity submits this statement for	r the purpose of changing its	s registered office or reg		-
ITLE DTS CORACE, RICHARD F CORACE, RICHARD F STREET ADDRESS STY-ST-ZIP CORACE, RICHARD F STREET ADDRESS STREET ADDRESS S	Tax filing r (See criter	requirement and elects to do so.	After May 1, 20 Make Check Paya	002 Fee will be \$550. ble to Department of	10. Election Campaign Financing     \$5.00 May B       Trust Fund Contribution.     Added to Fees	9
DVS     Delete     TITLE       IAME     GRIFFIN, GERALD F     NAME       STREET ADDRESS     5551 RIDGEWOOD DR.     STREET ADDRESS       STRY-ST-ZIP     CITY-ST-ZIP       ITILE     PD	itle Ame Street address	DTS Corace, Richard F 5551 Ridgewood Dr.		TITLE NAME STREET ADDRESS		tion
	iame Street address	DVS GRIFFIN, GERALD F 5551 RIDGEWOOD DR.	Delete	NAME STREET ADDRESS	🗌 Change 🗌 Addi	ion
IAME SHARPE, KEITH A NAME TREET ADDRESS 5551 RIDGEOOD DRIVE SUITE 203 STREET ADDRESS ITY-ST-ZIP NAPLES FL CITY-ST-ZIP	iame Treet adoress	Sharpe, Keith A 5551 Ridgeood Drive Suite 20		NAME STREET ADDRESS	🗋 Change 🔛 Addi	ion
TLE     Delete     TITLE     Change     Add       AME     NAME       TREET ADDRESS     STREET ADDRESS       TY-ST-ZIP     CITY-ST-ZIP	AME IREET ADDRESS		Delete	NAME STREET ADDRESS	Change Addi	ion
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