2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F01000005938

Entity Name
 NAPLES FALLING WATERS 504 MANAGEMENT, INC.



FILED Mar 08, 2006 08:00 AM Secretary of State

Principal Place of Business

201 N. ILLINOIS STREET, 23RD FLOOR INDIANAPOLIS, IN 46204

Mailing Address

201 N. ILLINOIS STREET, 23RD FLOOR-INDIANAPOLIS, IN 46204



DO NOT WRITE IN THIS SPACE

02132006 No Chg-P CR2E034 (11/05)

4. FEI Number 35-2154598 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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	named entity submits this statement for the pons of registered agent.	ourpose of changing its registere	d office or r	egistered agent, or be	oth, in the State of Fiorida. I am familiar with, and accept	
SIGNATURE_	Signature, typed of printed name of registered agent and title	if applicable. (NOTE. Registered	Agent signature	e (equired when reinstaling)	DATE	
	E NOW!!! FEE IS \$150.00 xy 1, 2006 Fee will be \$550.00	 Election Campaign Finance Trust Fund Contribution. 	eing 🖂	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS	,, ₄			
TITLE	PST				· · · · · · · · · · · · · · · · · · ·	
NAME	BROADBENT, GEORGE P					
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12. Thereby	certify that the information supplied with this f	ifing does not qualify for the exe	mptions co	ntained in Chapter 1	19, 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:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joyce A Bradley

2/17/06

(317) 237-2900 Destrue Phone