

FILE NOW: FILING FEE IS \$61.25

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Apr 13 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **756763** (9)

1. Corporation Name

NAPLES COUNCIL ON WORLD AFFAIRS, INC.

Principal Place of Business

Mailing Address

P.O. BOX 1434
NAPLES FL 33909

P.O. BOX 1434
NAPLES FL 33939

34106-1434

34106-1434

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

03/13/1981

4. FEI Number

59-2139347

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐

\$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

☒ Yes

☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☐ Yes

☒ No

10. Name and Address of New Registered Agent

CHRYSTAL, NEIL R., ESQ.
C/O DUNWOODY, WHITE & LONDON, P.A.
4001 TAMiami TRAIL NORTH SUITE 395
NAPLES FL 33940 34103

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☒ DELETE
NAME **BEDELL, ELINOR**
STREET ADDRESS **1807 SNOOK DRIVE**
CITY-ST-ZIP **NAPLES FL 34102**

TITLE **SD** ☐ DELETE
NAME **MORRISON, PATRICIA A.**
STREET ADDRESS **2453 LANTERN LANE**
CITY-ST-ZIP **NAPLES FL 34134**

TITLE **TD** ☐ DELETE
NAME **FOULKE, EDWARD**
STREET ADDRESS **1717 GULF SHORE BOULEVARD NORTH #701**
CITY-ST-ZIP **NAPLES FL 34102**

TITLE **VD** ☐ DELETE
NAME **DALEY, JOSEPH**
STREET ADDRESS **4401 GULF SHORE BOULEVARD NORTH #1102**
CITY-ST-ZIP **NAPLES FL 34103**

TITLE **PD** ☒ DELETE
NAME **TREADWELL, DONALD**
STREET ADDRESS **5970 PELICAN BAY BLVD #535**
CITY-ST-ZIP **NAPLES FL**

TITLE **P** ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D** ☐ Change ☒ Addition
1.2 NAME **DAVIS, WILLIAM**
1.3 STREET ADDRESS **2901 ERYTON RD.**
1.4 CITY-ST-ZIP **NAPLES, FL. 34103**

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP **34134**

3.1 TITLE **VD** ☒ Change ☒ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP **34102**

4.1 TITLE **PD** ☒ Change ☒ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP **34103**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE **TD** ☐ Change ☒ Addition
6.2 NAME **BUSH, JAMES**
6.3 STREET ADDRESS **6361 PELICAN BAY BLVD 701**
6.4 CITY-ST-ZIP **NAPLES FL 34108**

14. 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 annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Edward D. Foulke* **EDWARD D. FOULKE** 4/4/98 (941) 261-5171

CR2E037 (10/97)