

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09613

FILED  
Apr 23, 2008  
Secretary of State

Entity Name: NAPLES WINTERPARK I, INC.

**Current Principal Place of Business:**

3501 ANTARCTIC CIRCLE  
NAPLES, FL 34112

**New Principal Place of Business:**

**Current Mailing Address:**

745 12 AVE S. STE AA  
NAPLES, FL 34102

**New Mailing Address:**

FEI Number: 59-2545591      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MOORE PROPERTY MGMT  
12TH AVE S  
NAPLES, FL 34102    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

**OFFICERS AND DIRECTORS:**

Title: VP                    ( ) Delete  
Name: FERGUSON, JIM  
Address: 7414 LAUREN J DR  
City-St-Zip: MENTOR, OH 44060

Title: T                      ( ) Delete  
Name: HARTNETT, ROBERT  
Address: 5133 GRAND AVE  
City-St-Zip: WESTERN SPRINGS, IL 60558

Title: PD                    ( ) Delete  
Name: BROWN, RAE  
Address: 3637 ARCTIC CIR  
City-St-Zip: NAPLES, FL 34112

Title: S                      ( ) Delete  
Name: MOILANEN, DOUG  
Address: 1892 HIGHVIEW DR E  
City-St-Zip: SAUK RAPIDS, MN 56379

Title: D                      ( ) Delete  
Name: WARTSKI, HELEN  
Address: 3647 ARCTIC CIRCLE  
City-St-Zip: NAPLES, FL 34112

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAE BROWN

P

04/23/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date