

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47854

**FILED**  
**Apr 20, 2010**  
**Secretary of State**

**Entity Name:** CRETAN ASSOCIATION OF NAPLES AND SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

26834 MCLAUGHLIN BLVD  
BONITA SPRINGS, FL 34134

**New Principal Place of Business:**

**Current Mailing Address:**

26834 MCLAUGHLIN BLVD  
BONITA SPRINGS, FL 34134

**New Mailing Address:**

1620 DESOTO BLVD N.  
NAPLES, FL 34120

FEI Number: 65-0318232

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KONSTANTINE, TSISKAKIS  
26834 MCLAUGHLIN BLVD  
BONITA SPRINGS, FL 34134 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: D  
Name: CHRIS, ANDREOULAKIS  
Address: 1320 !2TH AVE. NE  
City-St-Zip: NAPLES, FL 34120

Title: VD  
Name: CHRIS, TZOUGANAKIS  
Address: 6180 HIDDEN OAKS LN  
City-St-Zip: NAPLES, FL 34119

Title: TD  
Name: CLEO, PETRAKIS  
Address: 971 ROSE WAY  
City-St-Zip: NAPLES, FL 34104

Title: SD  
Name: ALEXANDRA, MOUNTRAKIS  
Address: 1620 DESOTO BLVD. N  
City-St-Zip: NAPLES, FL 34120

I hereby 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 all other like empowered.

SIGNATURE: CHRIS ANDREOULAKIS

D

04/20/2010

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

\_\_\_\_\_  
Date