

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004455

FILED
May 01, 2004
Secretary of State

Entity Name: NAPLES ART ASSOCIATION, INC.

Current Principal Place of Business:

585 PARK ST.
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

585 PARK ST.
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 59-1022882

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POLLOCK, VICTORIA
585 PARK STREET
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: D () Delete
Name: DUNN, JANE
Address: 5551 RIDGEWOOD DRIVE
City-St-Zip: NAPLES, FL 34108

Title: VP () Delete
Name: HARRIS, ALAN
Address: 550 EAST 79TH ST APT 19-B
City-St-Zip: NEW YORK, NY 10021

Title: P () Delete
Name: SURLEY, DELORA
Address: 220 BUFFHORE BLVD.
City-St-Zip: NAPLES, FL 34102

Title: RD () Delete
Name: SWEENY, PAM
Address: 4021 G.S.B.W. #1505
City-St-Zip: NAPLES, FL 34103

Title: RSD () Delete
Name: MCLENON, BETTY
Address: 585 PARK STREET
City-St-Zip: NAPLES, FL 34102

Title: TD () Delete
Name: YOUNG, BETTE
Address: 6760 PELICAN BAY BLVD
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: P (X) Change () Addition
Name: WAY, PAUL
Address: 8231 BAY COLONY DR. # 2002
City-St-Zip: NAPLES, FL 34108

Title: D (X) Change () Addition
Name: SWEENY, PAM
Address: 4021 G.S.B.W. #1505
City-St-Zip: NAPLES, FL 34103

Title: RSD (X) Change () Addition
Name: LORCH, SUZANNE
Address: 1125 DORMIE DRIVE
City-St-Zip: NAPLES, FL 34108

Title: D (X) Change () Addition
Name: JOHNSON, KIMBERELY
Address: 1395 PANTHER LNAE STE300
City-St-Zip: NAPLES, FL 34109

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAUL WAY

P

05/01/2004

Electronic Signature of Signing Officer or Director

Date