

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004455

FILED  
Feb 03, 2006  
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: P ( ) Delete  
Name: SCOVILLE, PAT  
Address: 500 BALD EAGLE  
City-St-Zip: NAPLES, FL 34105

Title: VP ( ) Delete  
Name: HERSTIN, SCOTT  
Address: 765 SEAGATE DR.  
City-St-Zip: NAPLES, FL 34103

Title: T ( ) Delete  
Name: SMITH, CHERRY  
Address: 1886 SEVILLE BLVD # 1622  
City-St-Zip: NAPLES, FL 34109

Title: D ( ) Delete  
Name: TAYLOR, TOM  
Address: 3823 TAMiami TR E. #284  
City-St-Zip: NAPLES, FL 34112

Title: D ( ) Delete  
Name: BLACK, DEBBIE  
Address: 140 SECOND AVE S  
City-St-Zip: NAPLES, FL 34102

Title: D ( ) Delete  
Name: JOHNSON, KIMBERELY  
Address: 1395 PANTHER LANE STE300  
City-St-Zip: NAPLES, FL 34109

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SONNENBERG, FRED  
Address: 8120 LOWBANK DR.  
City-St-Zip: NAPLES, FL 34109

Title: VP (X) Change ( ) Addition  
Name: BLACK, DEBORAH  
Address: 140 SECOND AVE S  
City-St-Zip: NAPLES, FL 34102

Title: T (X) Change ( ) Addition  
Name: BLACK, JIM  
Address: 140 2ND AVE S  
City-St-Zip: NAPLES, FL 34102

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

Title: D (X) Change ( ) Addition  
Name: CHAMBERS, DEBRA  
Address: 2899 TIBRON DR EAST  
City-St-Zip: NAPLES, FL 34103

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JIM BLACK

TREA

02/03/2006

Electronic Signature of Signing Officer or Director

Date