

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716258

Entity Name: NAPLES TOWERS, INC.**Current Principal Place of Business:**214 BANYAN BLVD
NAPLES, FL 34102**Current Mailing Address:**C/O MELDON CONSULTANTS
4949 TAMAIMI TRAIL N., #201
NAPLES, FL 34103-3017 US**FEI Number:** 59-1305041**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MOORE, WILLIAM S
MELDON CONSULTANTS
4949 TAMAIMI TRAIL N., #201
NAPLES, FL 34103-3017 US*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**Officer/Director Detail :**

Title	SECRETARY, DIRECTOR
Name	HOY, CARLETON
Address	242 BANYAN BLVD.
City-State-Zip:	NAPLES FL 34102-5173

Title	PRESIDENT, DIRECTOR
Name	GRAZIANO, JOSEPH
Address	248 BANYAN BLVD.
City-State-Zip:	NAPLES FL 34102-5173

Title	VP, DIRECTOR
Name	GENTILE, KATHY
Address	220 BANYAN BLVD.
City-State-Zip:	NAPLES FL 34102-5172

Title	TREASURER, DIRECTOR
Name	DENNIS, RUSSELL
Address	216 BANYAN BLVD.
City-State-Zip:	NAPLES FL 34102-5172

Title	DIRECTOR
Name	CULLEN, JIM
Address	240 BANYAN BLVD.
City-State-Zip:	NAPLES FL 34102-5173

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: JOSEPH GRAZIANO

PRESIDENT

04/05/2017

Electronic Signature of Signing Officer/Director Detail_____
Date