

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003841

Entity Name: THE GOLISANO CHILDREN'S MUSEUM OF NAPLES, INC.**Current Principal Place of Business:**15080 LIVINGSTON ROAD
NAPLES, FL 34109**Current Mailing Address:**15080 LIVINGSTON ROAD
NAPLES, FL 34109 US**FEI Number:** 01-0687133**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FOERSTER, JONATHAN
15080 LIVINGSTON ROAD
NAPLES, FL 34109 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:** JONATHAN FOERSTER

02/15/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, CHAIRMAN
Name MONTGOMERY, JODIE
Address 15080 LIVINGSTON ROAD
City-State-Zip: NAPLES FL 34109

Title DIRECTOR, VC
Name PERRY, DANIEL
Address 15080 LIVINGSTON ROAD
City-State-Zip: NAPLES FL 34109

Title CEO
Name FOERSTER, JONATHAN
Address 15080 LIVINGSTON ROAD
City-State-Zip: NAPLES FL 34109

Title DIRECTOR, SECRETARY
Name CORBIN, TED
Address 15080 LIVINGSTON ROAD
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name GARRETT, APRIL
Address 15080 LIVINGSTON ROAD
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name THORNBURG, BRIAN DR.
Address 15080 LIVINGSTON ROAD
City-State-Zip: NAPLES FL 34109

Title TREASURER
Name PHILIPS, JASON
Address 15080 LIVINGSTON ROAD
City-State-Zip: NAPLES FL 34109

Title SECRETARY
Name GARVY, TONY
Address 15080 LIVINGSTON ROAD
City-State-Zip: NAPLES FL 34109

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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: JONATHAN FOERSTER

CEO

02/15/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ASKAR, SHERA
Address 15080 LIVINGSTON ROAD
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name GERRY, ASHLEY
Address 15080 LIVINGSTON ROAD
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name MEEK, KRISTINE
Address 15080 LIVINGSTON ROAD
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name ESSIG, CHRIS
Address 15080 LIVINGSTON ROAD
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name LANCASTER, ROB
Address 15080 LIVINGSTON ROAD
City-State-Zip: NAPLES FL 34109