

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000010339

**Entity Name:** THE CULINARY AND HOSPITALITY EDUCATION FOUNDATION  
OF SOUTHWEST FLORIDA, INC.

**FILED**  
**Feb 16, 2017**  
**Secretary of State**  
**CC3225911042**

**Current Principal Place of Business:**

CULINARY HOSPITALITY & EDUCATION FOUNDATION  
P.O BOX 413005  
NAPLES, FL 34101-3005

**Current Mailing Address:**

CULINARY HOSPITALITY& EDUCATION FOUNDATION  
P.O BOX 413005  
NAPLES, FL 34101-3005 US

**FEI Number: 20-1854573**

**Certificate of Status Desired: No**

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

CLASP INC.  
3001 TAMIAMI TRAIL NORTH  
4TH FLOOR  
NAPLES, FL 34103 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            PRESIDENT  
Name            BOUCHER, JEANETTE M  
Address        2524 GOLFSIDE DR.  
City-State-Zip: NAPLES FL 34110

Title            VP  
Name            CASKEY, KATHERINE  
Address        23570 ALAMANDA DR.  
                  UNIT 202  
City-State-Zip: BONITA SPRINGS FL 34135

Title            TREASURER  
Name            DUNLAP, WILLIAM M  
Address        579 7TH AVEN.  
City-State-Zip: NAPLES FL 34102

Title            SECRETARY  
Name            DENNIS, MARGUERITE J  
Address        2121 TARPON RD  
City-State-Zip: NAPLES FL 34102

Title            ASSISTANT TREASURER  
Name            CAFIERO, TARYN R  
Address        2504 SPICEBUSH LANE  
City-State-Zip: NAPLES FL 34105

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: TARYN CAFIERO**

**ASSISTANT TREASURER    02/16/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date