

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000010339

**FILED**  
**Jan 25, 2013**  
**Secretary of State**  
**CC7616545074**

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

**Current Principal Place of Business:**

81 SEAGATE DRIVE  
1501  
NAPLES, FL 34103

**Current Mailing Address:**

81 SEAGATE DRIVE  
1501  
NAPLES, FL 34103

**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 P  
Name HUSHON, JUDITH  
Address 81 SEAGATE DRIVE #1501  
City-State-Zip: NAPLES FL 34103

Title S  
Name MEEK, BARBARA  
Address 680 YUCCA ROAD  
City-State-Zip: NAPLES FL 34102

Title D  
Name KRIER, KENNETH  
Address 2335 GULF SHORE BLVD. N.  
City-State-Zip: NAPLES FL 34113

Title T  
Name HANNSZ, JANICE R  
Address 1755 VENEZIA CT  
City-State-Zip: NAPLES FL 34105

Title VP  
Name ROBERTSHAW, DARREN  
Address 24065 STILLWELL PARKWAY  
City-State-Zip: BONITA SPRINGS FL 34135

*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: JANICE R. HANNSZ**

**TREASURER**

**01/25/2013**

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

\_\_\_\_\_  
Date