

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000007329

Entity Name: NAPLES MACFRIENDS USER GROUP, INC.**Current Principal Place of Business:**C/O CUMMINGS & LOCKWOOD LLC
3001 TAMIAMI TRAIL NORTH, SUITE 400
NAPLES, FL 34103**Current Mailing Address:**C/O CUMMINGS & LOCKWOOD LLC
3001 TAMIAMI TRAIL NORTH, SUITE 400
NAPLES, FL 34103**FEI Number:** 65-0066788**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CLASP, INC.
3001 TAMIAMI TRAIL NORTH, SUITE 400
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 DIRECTOR, MEMBER ADVOCATE
Name VON SEGGERN, MARILYN
Address 420 PUTTER POINT CT
City-State-Zip: NAPLES FL 34103

Title DIRECTOR, TREASURER
Name PEACOCK, DONALD
Address 420 PUTTER POINT CT
City-State-Zip: NAPLES FL 34103

Title DIRECTOR, PRESIDENT
Name RUBIN, GEORGE
Address 445 DOCKSIDE DR
UNIT 801
City-State-Zip: NAPLES FL 34110

Title DIRECTOR, REGISTRAR
Name GOETTE, ECKART
Address 6516 THOMAS JEFFERSON CT
City-State-Zip: NAPLES FL 34108

Title DIRECTOR, SECRETARY
Name DORIO, MARTIN
Address 420 PUTTER POINT CT
City-State-Zip: NAPLES FL 34103

Title DIRECTOR, OTHER
Name BOHR, JEFFREY
Address 1300 HENLEY ST
APT 1804
City-State-Zip: NAPLES FL 34105

Title DIRECTOR, OTHER
Name KENEDI, ROBERT
Address 11726 NIGHT HERON DR
City-State-Zip: NAPLES FL 34119

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: MARTIN M DORIO JR**SECRETARY****02/01/2018**

Electronic Signature of Signing Officer/Director Detail

Date