

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09613

**Entity Name:** NAPLES WINTERPARK I, INC.

**Current Principal Place of Business:**

3501 ANTARCTIC CIRCLE  
NAPLES, FL 34112

**Current Mailing Address:**

5603 NAPLES BLVD.  
NAPLES, FL 34109

**FEI Number:** 59-2545591

**Certificate of Status Desired:** No

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

MOORE PROPERTY MGMT  
5603 NAPLES BLVD.  
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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title D  
Name MALIO, MARILYN  
Address 3746 NORTHWINDS DRIVE  
City-State-Zip: NAPLES FL 34112

Title DIRECTOR  
Name BROWN, RAE  
Address 3637 ARCTIC CIR  
City-State-Zip: NAPLES FL 34112

Title P  
Name MOILANEN, DOUG  
Address 1892 HIGHVIEW DR E  
City-State-Zip: SAUK RAPIDS MN 56379

Title DIRECTOR  
Name BELL, ROBERT  
Address 3561 ANTARCTIC CIRCLE  
City-State-Zip: NAPLES FL 34112

Title VP  
Name BARRETT, DOUGLAS  
Address 367 EDGEWATER DR. EAST  
City-State-Zip: E. FALMOUTH MA 02536

*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:** DOUG MOILANEN

**PRESIDENT**

**04/16/2015**

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

\_\_\_\_\_  
Date