#### 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22566

Entity Name: SUPPORTERS OF DEL-NOR WIGGINS PARK, INC.

**FILED** Jan 21, 2014 **Secretary of State** CC5407482285

# **Current Principal Place of Business:**

**DELNOR-WIGGINS PASS STATE PARK** 11135 GULF SHORE DR. N. NAPLES, FL 34108

### **Current Mailing Address:**

**DELNOR-WIGGINS PASS STATE PARK** 11135 GULF SHORE DR. N. NAPLES, FL 34108

FEI Number: 65-0013222 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BEER, LARRY 5275 BIRMINGHAM DR. #102 NAPLES, FL 34110 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: LARRY BEER 01/21/2014

> Date Electronic Signature of Registered Agent

#### Officer/Director Detail:

Title	SECRETARY	Title	DIRECTOR
Name	BYRD, MARCIA	Name	GAGNIER, JOE
Address	1521 WEYBRIDGE CIRCLE	Address	1213 IMPERIAL DR.
City-State-Zip:	NAPLES FL 34110	City-State-Zip:	NAPLES FL 34110

VΡ Title **DIRECTOR** Title

Name PETRILLO, ANN NYE, PHIL Name 11 BLUEBILL AVE. 11 BLUEBILL AVE Address Address #201 #1103

City-State-Zip: NAPLES FL 34108 City-State-Zip: NAPLES FL 34108

Title **TREASURER** Title DIRECTOR Name BELFIORI. TOM RASCH, KATHE Name

5645 WHISPERWOOD Address 3490 LEEWARD PASSAGE CT. Address #203 #503

City-State-Zip: BONITA SPRINGS FL 34134 City-State-Zip: NAPLES FL 34110

Title **PRESIDENT** Title DIRECTOR MORGAN, ELSIE Name Name BELFIORI, CAROL 20 SEAGATE DR. Address Address 3490 LEEWARD PASSAGE CT. #501

#203

NAPLES FL 34103 City-State-Zip: City-State-Zip: BONITA SPRINGSS FL 34134

#### Continues on page 2

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.

01/21/2014 SIGNATURE: LARRY BEER DIRECTOR

# Officer/Director Detail Continued:

Title DIRECTOR
Name BEER, LARRY

Address 5275 BIRMINGHAM DR.

#102

City-State-Zip: NAPLES FL 34110