

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43312

**FILED
Jun 29, 2020
Secretary of State
5386682641CC**

Entity Name: NAPLES COMMUNITY SAILING CENTER, INC.

Current Principal Place of Business:

NAPLES LANDINGS
NAPLES, FL 34102

Current Mailing Address:

P.O. BOX 1251
NAPLES, FL 34106

FEI Number: 65-0261288

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PAGE, CHIP M
225 LOGAN BLVD SOUTH
NAPLES, FL 34119 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: CHIP PAGE

06/29/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR	Title	PRESIDENT, DIRECTOR
Name	CORBAN, DAVID M	Name	PAGE, CHIP
Address	2832 ARBUTUS STREET	Address	225 S. LOGAN BLVD.
City-State-Zip:	NAPLES FL 34112	City-State-Zip:	NAPLES FL 34119
Title	DIRECTOR	Title	VP, DIRECTOR
Name	SHUMWAY, CHARLES C	Name	TIMMINS, CRAIG D
Address	376 EDGEMERE WAY N.	Address	76 CARIBBEAN RD
City-State-Zip:	NAPLES FL 34105	City-State-Zip:	NAPLES FL 34108
Title	TREASURER	Title	DIRECTOR
Name	DOUGLAS, WINTON S	Name	PAGE, LISA
Address	520 RIVIERA DRIVE	Address	225 S. LOGAN BLVD.
City-State-Zip:	NAPLES FL 34103	City-State-Zip:	NAPLES FL 34119
Title	DIRECTOR	Title	DIRECTOR
Name	MOORE, JOHN	Name	THOMAS, CINDY
Address	1800 GALLEON WAY	Address	5295 BENFIELD RD.
City-State-Zip:	NAPLES FL 34102	City-State-Zip:	NAPLES FL 34114

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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: WINTON S. DOUGLAS, JR.

TREASURER

06/29/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR

Name DOANE, JAMES

Address 2400 9TH ST N SUITE 101

City-State-Zip: NAPLES FL 34103