2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001547

Entity Name: NAPLES BOTANICAL GARDEN, INC.

Current Principal Place of Business:

4820 BAYSHORE DR NAPLES, FL 34112

Current Mailing Address:

4820 BAYSHORE DR NAPLES. FL 34112 US

FEI Number: 65-0511429 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCGINNIS, DONNA 4820 BAYSHORE DR. NAPLES, FL 34112 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: DONNA MCGINNIS 02/05/2018

Electronic Signature of Registered Agent

Date

FILED Feb 05, 2018

Secretary of State

CC9413724891

Officer/Director Detail:

Title IMMEDIATE PAST CHAIRMAN Title CHAIRMAN

MCCANN, THOMAS D CROSETTO, CARL Name Name 4820 BAYSHORE DR. 4820 BAYSHORE DR. Address Address City-State-Zip: NAPLES FL 34112 NAPLES FL 34112 City-State-Zip:

Title **SECRETARY** Title **TREASURER**

Name CHABRAJA, ELEANOR B Name SMITH, DAVID B Address 4820 BAYSHORE DRIVE Address 4820 BAYSHORE DR. NAPLES FL 34112 City-State-Zip: City-State-Zip: NAPLES FL 34112

Title DIRECTOR Title **DIRECTOR**

Name BERGER, JANE PURDY LAGRIPPE, JAMES Name Address 4820 BAYSHORE DR Address 4820 BAYSHORE DR. City-State-Zip: NAPLES FL 34112 NAPLES FL 34112 City-State-Zip:

Title DIRECTOR Title DIRECTOR DIAZ, FERMIN A Name CRESCENZI, ADAM D Name 4820 BAYSHORE DR Address 4820 BAYSHORE DR Address

City-State-Zip: NAPLES FL 34112 City-State-Zip: NAPLES FL 34112

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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.

02/05/2018 SIGNATURE: DONNA MCGINNIS CEO/PRESIDENT

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued: **DIRECTOR**

Name DYKE, THOMPSON Address 4820 BAYSHORE DR NAPLES FL 34112 City-State-Zip:

Title **DIRECTOR**

Title

Name FINN, BARBARA J Address 4820 BAYSHORE DR City-State-Zip: NAPLES FL 34112

Title **DIRECTOR** Name GOEBEL, MARK Address 4820 BAYSHORE DR City-State-Zip: NAPLES FL 34112

Title DIRECTOR Name HALL, DONNA S Address 4820 BAYSHORE DR City-State-Zip: NAPLES FL 34112

Title **DIRECTOR**

Name KAPNICK, SCOTT B Address 4820 BAYSHORE DR NAPLES FL 34112 City-State-Zip:

Title **DIRECTOR**

SCOTT, KAREN M Name

Address 4820 BAYSHORE DRIVE

City-State-Zip: NAPLES FL 34112

Title **DIRECTOR**

Name VANDENBERG, JOHN E Address 4820 BAYSHORE DRIVE NAPLES FL 34112 City-State-Zip:

Title DIRECTOR Name WHITE, LINDA G

Address 4820 BAYSHORE DRIVE

City-State-Zip: NAPLES FL 34112

Title PRESIDENT AND CEO Name MCGINNIS, DONNA Address 4820 BAYSHORE DR City-State-Zip: NAPLES FL 34112

Title DIRECTOR

Name KAPNICK, KATHLEEN Address 4820 BAYSHORE DR City-State-Zip: NAPLES FL 34112

Title **DIRECTOR**

Name EVENSTAD, GRACE Address 4820 BAYSHORE DR City-State-Zip: NAPLES FL 34112

Title **DIRECTOR**

FOGG, LESLIE K S Name Address 4820 BAYSHORE DR City-State-Zip: NAPLES FL 34112

Title **DIRECTOR**

GOFORTH, STEPHANIE E Name Address 4820 BAYSHORE DR City-State-Zip: NAPLES FL 34112

Title DIRECTOR Name HERB, JUDITH A Address 4820 BAYSHORE DR City-State-Zip: NAPLES FL 34112

Title VC

Name MERRITT, LISA K

Address 4820 BAYSHORE DRIVE City-State-Zip: NAPLES FL 34112

Title **DIRECTOR**

Name SPROUL, JULIET C Address 4820 BAYSHORE DRIVE City-State-Zip: NAPLES FL 34112

Title DIRECTOR

Name WARE, CATHERINE K 4820 BAYSHORE DRIVE Address City-State-Zip: NAPLES FL 34112

Title **DIRECTOR IN MEMORIAM** Name KAPNICK, HARVEY E JR. Address 4820 BAYSHORE DRIVE NAPLES FL 34112 City-State-Zip:

Title **DIRECTOR**

Name RUSSELL, DEBORAH Address 4820 BAYSHORE DR City-State-Zip: NAPLES FL 34112