

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004455

Entity Name: NAPLES ART ASSOCIATION, INC.**Current Principal Place of Business:**585 PARK ST.
NAPLES, FL 34102**Current Mailing Address:**585 PARK ST.
NAPLES, FL 34102 US**FEI Number:** 59-1022882**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCHLEHR, AIMEE
585 PARK STREET
NAPLES, FL 34102 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:** AIMEE SCHLEHR

03/26/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name BULLOCH, STACEY
Address 585 PARK ST
City-State-Zip: NAPLES FL 34102

Title 1 VP
Name HUSHON, JOHN
Address 585 PARK ST
City-State-Zip: NAPLES FL 34102

Title ED
Name AIMEE, SCHLEHR
Address 2041 PRINCE DR
City-State-Zip: NAPLES FL 34110

Title 2ND VP
Name DEMPSEY, WILL
Address 585 PARK ST.
City-State-Zip: NAPLES FL 34102

Title SECRETARY
Name SCHELL, JENNIFER
Address 585 PARK ST.
City-State-Zip: NAPLES FL 34102

Title TREASURER
Name SROKA, ANDREW
Address 585 PARK ST.
City-State-Zip: NAPLES FL 34102

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: AIMEE E SCHLEHR**CEO/EXECUTIVE
DIRECTOR**

03/26/2014

Electronic Signature of Signing Officer/Director Detail

Date