SIGNATURE: MELISSA SARACINO LAMONT

Title

Name

Address

City-State-Zip:

SECRETARY

WHITE. SARA

206 RIDGE DRIVE NA NAPLES FL 34108

### **Current Mailing Address:** 206 RIDGE DRIVE NAPLES, FL 34108 US

Electronic Signature of Registered Agent

LAMONT. MELISSA SARACINO

2630 50TH AVE NE

### FEI Number: 65-0793008

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

ACME AGENT FLORIDA LLC 9132 STRADA PLACE 3RD FLOOR NAPLES, FL 34108 US

**Officer/Director Detail :** 

Title

Name

Address

CEO

City-State-Zip: NAPLES FL 34120

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.

#### 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: MELISSA SARACINO LAMONT

EXECUTIVE DIRECTOR

01/10/2022 Date

Electronic Signature of Signing Officer/Director Detail

## FILED Jan 10, 2022 Secretary of State 8289553313CC

01/10/2022 Date

Certificate of Status Desired: Yes

# 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N9700006252

Entity Name: NAPLES THERAPEUTIC RIDING CENTER, INC.

## **Current Principal Place of Business:**

206 RIDGE DRIVE NAPLES. FL 34108