

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 326177

Entity Name: THE SCOTTSDALE CO.**Current Principal Place of Business:**4200 GULF SHORE BLVD. NORTH
NAPLES, FL 34103**Current Mailing Address:**4200 GULF SHORE BLVD. NORTH
NAPLES, FL 34103 US**FEI Number:** 36-2495903**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GREGORY, C. NEIL
4001 TAMiami TRAIL N
SUITE 250
NAPLES, FL 34103 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:** C. NEIL GREGORY

04/19/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR
Name	LUTGERT, SCOTT F
Address	4200 GULF SHORE BLVD. N.
City-State-Zip:	NAPLES FL 34103

Title	PRESIDENT, DIRECTOR
Name	GUTMAN, HOWARD B
Address	4200 GULF SHORE BLV N.
City-State-Zip:	NAPLES FL 34103

Title	VP, ASST. SECRETARY
Name	SHEETS, THOMAS S
Address	4200 GULF SHORE BLVD N
City-State-Zip:	NAPLES FL 34103

Title	SECRETARY, TREASURER
Name	CROWLEY, DAVID M
Address	4200 GULF SHORE BLVD N
City-State-Zip:	NAPLES FL 34103

Title	VP
Name	BRINGARDNER, THOMAS A JR.
Address	4200 GULF SHORE BLVD. N.
City-State-Zip:	NAPLES FL 34103

Title	VP, DIRECTOR
Name	HOYT, MICHAEL T
Address	4200 GULF SHORE BLVD N
City-State-Zip:	NAPLES FL 34103

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HOWARD B GUTMAN

PRES,DIR

04/19/2017

Electronic Signature of Signing Officer/Director Detail

Date