

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L13735

**FILED**  
**Feb 10, 2017**  
**Secretary of State**  
**CC1533375521**

**Entity Name:** THE SPORTY SEAHORSE, INC.

**Current Principal Place of Business:**

362 PERIWINKLE WAY  
C/O JOHN T. NAPPI  
SANIBEL, FL 33957

**Current Mailing Address:**

362 PERIWINKLE WAY  
C/O JOHN T. NAPPI  
SANIBEL, FL 33957

**FEI Number:** 65-0142356

**Certificate of Status Desired:** No

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

NAPPI, JOHN T  
% THE SPORTY SEAHORSE INC  
362 PERIWINKLE WAY  
SANIBEL, FL 33957 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DP  
Name NAPPI, JOHN T.  
Address 16224 EDGEMONT DRIVE  
City-State-Zip: FT. MYERS FL 33908

Title DV  
Name NAPPI, JOANNE  
Address 16224 EDGEMONT DRIVE  
City-State-Zip: FT. MYERS FL 33908

Title DS  
Name NAPPI, DEBORA  
Address 16224 EDGEMONT DRIVE  
City-State-Zip: FT. MYERS FL 33908

*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:** JOHN T. NAPPI

**PRESIDENT**

**02/10/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date