

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000002055

**Entity Name:** ESTUARY OF NAPLES, INC.

**Current Principal Place of Business:**

4200 GULF SHORE BLVD. N.  
NAPLES, FL 34103

**Current Mailing Address:**

4200 GULF SHORE BLVD. N.  
NAPLES, FL 34103

**FEI Number:** 59-3629415

**Certificate of Status Desired:** No

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

GREGORY, C. NEIL  
4001 TAMiami TRAIL N., STE. 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:**

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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

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

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

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

Title TREASURER  
Name CROWLEY, DAVID M  
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

VT

03/18/2015

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

\_\_\_\_\_  
Date