

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000029954

**FILED**  
**Feb 27, 2013**  
**Secretary of State**  
**CC1210379649**

**Entity Name:** DOONER MANAGEMENT, INC.

**Current Principal Place of Business:**

1010 FIFTH AVENUE SOUTH  
#300  
NAPLES, FL 34102

**Current Mailing Address:**

1010 FIFTH AVENUE SOUTH  
#300  
NAPLES, FL 34102 US

**FEI Number:** 65-0596482

**Certificate of Status Desired:** No

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

KELLY, CHARLES MJR.  
2390 TAMiami TRAIL NORTH  
SUITE 204  
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 SECRETARY/DIRECTOR  
Name LEE, NANCY D.  
Address 302 RIDGE DRIVE  
City-State-Zip: NAPLES FL 34108

Title TREASURER/DIRECTOR  
Name DOONER, JOAN E.  
Address P.O. BOX 388  
City-State-Zip: DEPOE BAY OR 97341

Title PRESIDENT/DIRECTOR  
Name DOONER, ANTON E.  
Address P.O. BOX 8  
City-State-Zip: MONTEZUMA NC 28853

Title VP  
Name LEE, DERRILL E.  
Address 12908 BLOOMFIELD STREET  
#103  
City-State-Zip: STUDIO CITY CA 91604

*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:** NANCY D. LEE

**SECRETARY/DIRECTOR**

**02/27/2013**

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

\_\_\_\_\_  
Date