2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 06, 2005
Secretary of State

DOCUMENT# 711151

Entity Name: NAPLES POLICE ATHLETIC LEAGUE, INC.

Current Principal Place of Business:

POLICE DEPARTMENT
365 RIVERSIDE CIR
NAPLES, FL 34102 US

New Principal Place of Business:

POLICE DEPARTMENT
355 RIVERSIDE CIR
NAPLES, FL 34102 US

Current Mailing Address:

POLICE DEPARTMENT
355 RIVERSIDE CIR
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 65-0263695 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MOORE, STEVEN C
355 RIVERSIDE CR
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MOORE, STEVEN
Address: 355 RIVERSIDE CR.
City-St-Zip: NAPLES, FL 34102

Title: D ( ) Delete
Name: SUGRUE, DAVID
Address: 355 RIVERSIDE CR.
City-St-Zip: NAPLES, FL 34102

Title: ED ( ) Delete
Name: BARKLEY, JOHN
Address: 355 RIVERSIDE CR.
City-St-Zip: NAPLES, FL 34102

Title: D ( ) Delete
Name: COX, RALPH
Address: 355 RIVERSIDE CR.
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN BSRKLEY OFF 07/06/2005
Electronic Signature of Signing Officer or Director — Date