

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 02, 2008 08:00 AM
Secretary of State

DOCUMENT # 717348

1. Entity Name

LIONS GATE OF NAPLES, INC.



Principal Place of Business

2919 GULF SHORE BLVD., NORTH
NAPLES FL 34103
US

Mailing Address

C/O MELDON CONSULTANTS
800 HARBOUR DRIVE STE #7/8
NAPLES FL 34103
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1298376

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/07)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOORE, WILLIAM S
C/O MELDON CONSULTANTS
4949 TAMiami TR. N. #201
NAPLES FL 34103-3017

Name

Street Address (P O Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature is required when re-stating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME BONEBRAKE, RONALD
STREET ADDRESS 2919 GULF SHORE BLVD N, #703
CITY-ST-ZIP NAPLES FL 34103

TITLE S ☐ Delete
NAME HARDEK, JOHN J
STREET ADDRESS 2919 GULF SHORE BLVD., 701
CITY-ST-ZIP NAPLES FL 34103

TITLE DV ☐ Delete
NAME MATTHEWS, KATHLEEN
STREET ADDRESS 2919 GULF SHORE BLVD N, #303
CITY-ST-ZIP NAPLES FL 34103

TITLE TD ☐ Delete
NAME STROHM, PHILIP A
STREET ADDRESS 2919 GULF SHORE BLVD N. #501
CITY-ST-ZIP NAPLES FL 34103

TITLE DV ☐ Delete
NAME SMITH, CARTER JR
STREET ADDRESS 2919 GULF SHORE BLVD N, #103
CITY-ST-ZIP NAPLES FL 34103

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William S. Moore William S. Moore Registered Agent 4/29/2008 239-435-0424