2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2012
Secretary of State

DOCUMENT# 717348

Entity Name: LIONS GATE OF NAPLES, INC.

Current Principal Place of Business:

2919 GULF SHORE BLVD., NORTH
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 59-1298376 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOORE, WILLIAM S
C/O MELDON CONSULTANTS
4949 TAMIAMI TR. N. #201
NAPLES, FL 341033017 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
Name: BAGENSTOSE, JEB DR.
Address: 2919 GULF SHORE BLVD N, #202
City-St-Zip: NAPLES, FL 34103

Title: D
Name: NEIGHBOURS, SHARON
Address: 2919 GULF SHORE BLVD., # 401
City-St-Zip: NAPLES, FL 34103

Title: D
Name: COMERFORD, MICHAEL
Address: 2919 GULF SHORE BLVD N, #603
City-St-Zip: NAPLES, FL 34103

Title: TD
Name: HOKE, CHARLES
Address: 2919 GULF SHORE BLVD N. #102
City-St-Zip: NAPLES, FL 34103

Title: SD
Name: SMITH, CARTER JR
Address: 2919 GULF SHORE BLVD N, #103
City-St-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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEB BAGENSTOSE PRES 04/25/2012

Electronic Signature of Signing Officer or Director Date