

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728662

FILED  
Apr 08, 2010  
Secretary of State

**Entity Name:** THE LAURENTIANS OF NAPLES, INC.

**Current Principal Place of Business:**

1285 GULF SHORE BLVD NO.  
NAPLES, FL 34102

**New Principal Place of Business:**

**Current Mailing Address:**

1285 GULF SHORE BLVD NO.  
NAPLES, FL 34102

**New Mailing Address:**

**FEI Number:** 59-1606462

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DOHL, PAUL R  
1285 GULF SHORE BLVD N  
APT 7 B  
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: VP  
Name: MASTERSON, JOE  
Address: 1285 GULFSHORE BLVD N, # 8B  
City-St-Zip: NAPLES, FL 34102

Title: VP  
Name: DOHL, PAUL  
Address: 1285 GULF SHORE BLVD. N.  
City-St-Zip: NAPLES, FL 34102

Title: P  
Name: GRUMHAUS, DAVID D  
Address: 1285 GULF SHORE BLVD. N #4B  
City-St-Zip: NAPLES, FL 34102

Title: T  
Name: SPEARS, JOHN  
Address: 1285 GULF SHORE BLVD. N  
City-St-Zip: NAPLES, FL 34102

Title: S  
Name: HAYWARD, THOMAS  
Address: 1285 GULF SHORE BLVD. N. UNIT6C  
City-St-Zip: NAPLES, FL 34102

Title: D  
Name: SORENSON, EDMUND  
Address: 1285 GULFSHORE BLVD N. #7D  
City-St-Zip: NAPLES, FL 34102

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: JOHN SPEARS

T

04/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date