

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Jun 13, 2012  
Secretary of State**

DOCUMENT# 728662

**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:**THE COMPASS MANAGEMENT GROUP  
3701 TAMIAMI TRAIL NORTH  
NAPLES, FL 34103**Current Mailing Address:**1285 GULF SHORE BLVD NO.  
NAPLES, FL 34102**New Mailing Address:**C/O THE COMPASS MANAGEMENT GROUP  
3701 TAMIAMI TRAIL NORTH  
NAPLES, FL 34103

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  
UNIT # 7-B  
NAPLES, FL 34102 US**Name and Address of New Registered Agent:**THE COMPASS MANAGEMENT GROUP  
3701 TAMIAMI TRAIL NORTH  
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: ESTHER MOREY

06/13/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

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

Title: VP  
Name: DOHL, PAUL R  
Address: 1285 GULF SHORE BLVD. N. #7-B  
City-St-Zip: NAPLES, FL 34102

Title: P  
Name: MASTERSON, JOE  
Address: 1285 GULF SHORE BLVD. N #8-B  
City-St-Zip: NAPLES, FL 34102

Title: T  
Name: SPEARS, JOHN  
Address: 1285 GULF SHORE BLVD. N #7-A  
City-St-Zip: NAPLES, FL 34102

Title: S  
Name: HAYWARD, THOMAS  
Address: 1285 GULF SHORE BLVD. N. #6-C  
City-St-Zip: NAPLES, FL 34102

Title: D  
Name: RAU, COLLETTE  
Address: 1285 GULF SHORE BLVD N. #2-C  
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: ESTHER MOREY

SVP

06/13/2012

Electronic Signature of Signing Officer or Director

Date