

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 01, 2004 8:00 am
Secretary of State

04-01-2004 90027 002 ****61.25

DOCUMENT # 728733 1. Entity Name NAPLES MARINER, INC.					
Principal Place of Business 1295 GULF SHORE BOULEVARD SOUTH NAPLES FL 34102			Mailing Address 1295 GULF SHORE BOULEVARD SOUTH NAPLES FL 34102		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-1541943	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
5. Name and Address of Current Registered Agent INGRAM, LARRY M 900 SIXTH AVENUE SOUTH SUITE 302 NAPLES FL 34102				7. Name and Address of New Registered Agent 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: <i>Sorry, signed on wrong line</i> Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent cannot be removed when reappointing)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD WATSON, PAMELA 463 17TH AVENUE SOUTH NAPLES FL 34102	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD WATSON, DORCAS H 1295 GULF SHORE BLVD S NAPLES FL 34102	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD WATSON, GORDON 463 17TH AVENUE SOUTH NAPLES FL 34102	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD AUSTIN, CAROL 90 DUBLIN AVE NASHUA NH	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FOX, ANTHONY 914 GLAMIS CIRCLE SIGNAL MOUNTAIN TN 37377	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <i>Gordon Watson, Dir 2/26/04</i> (239-261-7313) SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					