

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737756

FILED  
Jun 29, 2005  
Secretary of State

Entity Name: ST. VINCENTDE PAUL SOCIETY NAPLES DISTRICT COUNCIL, INC.

**Current Principal Place of Business:**

3190 DAVIS BLVD.  
NAPLES, FL 339424343

**New Principal Place of Business:**

**Current Mailing Address:**

2874 DAVIS BLVD.  
NAPLES, FL 34104 US

**New Mailing Address:**

FEI Number: 59-1711287      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

HENRY, CAROLYN S  
7680 MEADOW LAKES DR #1  
NAPLES, FL 34104 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: PT ( ) Delete  
Name: ASHE, DONALD  
Address: 1845 SEVILLE BLVD #621  
City-St-Zip: NAPLES, FL 34109

Title: VPT ( ) Delete  
Name: MARKUNAS, MARIE  
Address: 1424 MONARCH CIRCLE  
City-St-Zip: NAPLES, FL 34116

Title: TT ( ) Delete  
Name: ANTI, ARTHUR W  
Address: 23641 WATERSIDE DR  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: EXS ( ) Delete  
Name: HENRY, CAROLYN S  
Address: 7680 MEADOW LAKES DR #1  
City-St-Zip: NAPLES, FL 34104

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: CAROLYN S.HENRY

Electronic Signature of Signing Officer or Director

EX.D

06/29/2005

Date