

**2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 24, 2010  
Secretary of State**

DOCUMENT# 757666

Entity Name: NAPLES RETIREMENT, INC.

**Current Principal Place of Business:**

1000 LELY PALMS DRIVE  
P.M. BOX F-147  
NAPLES, FL 34113

**New Principal Place of Business:**

**Current Mailing Address:**

1000 LELY PALMS DRIVE  
P.M. BOX F-147  
NAPLES, FL 34113

**New Mailing Address:**

FEI Number: 59-2120628      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:**

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

WESTMAN, CARL  
5551 RIDGEWOOD DRIVE  
STE 101  
NAPLES, FL 34108 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HAGAN, CHRIS  
Address: 2350 STAMFORD COURT  
City-St-Zip: NAPLES, FL 34112

Title: V  
Name: GOUVEIA, RICHARD  
Address: 608 LAMBTON LANE  
City-St-Zip: NAPLES, FL 34104

Title: S  
Name: MORBEE, DAWN  
Address: 4704 LAKEWOOD BLVD  
City-St-Zip: NAPLES, FL 34112

Title: T  
Name: MILLER, TIM G  
Address: 4735 TAMiami TRAIL EAST  
City-St-Zip: NAPLES, FL 34112

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: TIM G. MILLER

T

05/24/2010

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

\_\_\_\_\_  
Date