2005 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N01000006614 NATIONAL ASSOCIATION OF ASIAN AMERICAN PROFESSIONALS IN SW FLORIDA, INC.

FILED

Secretary of State

Mar 21, 2005 8:00 am

03-21-2005 90083 040 ****61.25 Principal Place of Business TOGECUUP Mailing Address PO BOX 9875 PO BOX 9875 NAPLES, FL 34101 NAPLES, FL 34101 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03072005 Chg-NP CR2E037 (10/03) City & State City & State Applied For 4. FEI Numbe 59-3726509 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required ...6.. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ALAIMO, MARVE A Street Address (P.O. Box Number is Not Acceptable) 24311 WALDEN CENTER DRIVE, SUITE 201 BONITA SPRINGS, FL 34134 City 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 . Signature, typed or printed name of registered agent and title it applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be П Trust Fund Contribution. Florida Department of State Due by May 1, 2005 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PD TITLE XI Addition TITLE ☐ Delete ☐ Change WRIGHT, JUDY NAME NAME Slote, Kim **500 LOGAN BLVD** STREET ADDRESS STREET ADDRESS 2030 Swansions Run CITY-ST-ZIP NAPLES, FL 34119 CITY-ST-ZIP Naples, FLo. ☐ Delete TITLE VTD Change ☐ Addition TITLE INTHALANSY, VATSANA NAME NAME Inthalansy, Vatsana STREET ADDRESS 8889 PELICAN BAY BLVD. SUITE 200 STREET ADDRESS 8889 Pelican Bay Blvd. CITY-ST-ZIP NAPLES, FL 34108 CITY-ST-ZIP Naples, FL 34108 Delete TITLE X Addition TITLE ☐ Change GRASMEIER, MARIE NAME Lin, Judy NAME 999.VANDERBILT BCH RD. SUITE 601. STREET ADDRESS STREET ADDRESS 4001 Tamiami Trail-North-CITY-ST-ZIP NAPLES, FL 34108 CITY-ST-ZIP Naples, FL 34103 TITLE SD X Delete TITLE Change ☐ Addition Alaimo, Marve Ann KIM, CHEN NAME NAME 4099 TAMIAMI TRAIL NORTH STREET ADDRESS STREET ADDRESS 24311 Walden Center Dr., Ste 201 NAPLES, FL 34103 CITY-ST-ZIP CITY-ST-ZIP Rontia Springs, FL 34134 Delete
De TITLE Change TITLE ☐ Addition ZUNG CLOUGH, REBECCA Y NAME NAME STREET ADDRESS 3251 PINE RIDGE RD. STREET ADDRESS NAPLES, FL 34109 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE Change ☐ Addition ZHI, WU NAME NAME STREET ADDRESS 10430 BONITA BEACH RD. STREET ADDRESS **BONITA SPRINGS, FL 34135** CITY-ST-7IP CITY-ST-ZIP

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.

Judy Wright SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

239-514-1000

Daytime Phone #