

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008025

FILED  
Apr 20, 2011  
Secretary of State

**Entity Name:** CANCER ALLIANCE OF NAPLES, INC.

**Current Principal Place of Business:**

733 FOURTH AVENUE NORTH  
NAPLES, FL 34102

**New Principal Place of Business:**

990 FIRST AVENUE SOUTH  
200  
NAPLES, FL 34102

**Current Mailing Address:**

733 FOURTH AVENUE NORTH  
NAPLES, FL 34102

**New Mailing Address:**

990 FIRST AVENUE SOUTH  
200  
NAPLES, FL 34102

**FEI Number:** 22-3879709

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DOLAN, KEVIN  
535 RIDGE DR  
NAPLES, FL 34108 US

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

NACKLEY, JENNIFER  
1395 PANTHER LANE  
300  
NAPLES, FL 34109 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: JENNIFER NACKLEY

04/20/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: CONTI, GERALD J  
Address: 3551 WESTVIEW DRIVE #203  
City-St-Zip: NAPLES, FL 34104 US

Title: D  
Name: DOLAN, KEVIN  
Address: 535 RIDGE DRIVE  
City-St-Zip: NAPLES, FL 34108 US

Title: T  
Name: PISANI, CYNTHIA  
Address: 3838 TAMiami TRAIL NORTH, STE 200  
City-St-Zip: NAPLES, FL 34103 US

Title: P  
Name: NACKLEY, JENNIFER  
Address: 6614 CHESTNUT CIRCLE  
City-St-Zip: NAPLES, FL 34108 US

Title: VP  
Name: NOLAN, SEAN  
Address: 2375 TAMiami TRAIL N, STE 110  
City-St-Zip: NAPLES, FL 34103 US

Title: D  
Name: NORGART, SHARON  
Address: 6821 MILL RUN CIRCLE  
City-St-Zip: NAPLES, FL 34109

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: CYNTHIA PISANI

TREA

04/20/2011

Electronic Signature of Signing Officer or Director

Date