

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008061

FILED
Feb 02, 2007
Secretary of State

Entity Name: NAPLES AREA CIPS COUNCIL, INC.

Current Principal Place of Business:

PMB 3005, 1460 GOLDEN GATE PKWY
#103
NAPLES, FL 34105 US

New Principal Place of Business:

Current Mailing Address:

PMB 3005, 1460 GOLDEN GATE PKWY
#103
NAPLES, FL 34105 US

New Mailing Address:

FEI Number: 20-5295814

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAZ-PERERA, HILDA L
5630 COPPER LEAF LANE
NAPLES, FL 34116 US

Name and Address of New Registered Agent:

KUNIHIO, DESIREE
1320 BLUE POINT AVENUE, #2
NAPLES, FL 34102 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: DESIREE KUNIHIO

02/02/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KUNIHIO, DESIREE
Address: 1320 BLUE POINT AVENUE #2
City-St-Zip: NAPLES, FL 34102 US

Title: VP () Delete
Name: BENSON, MARK
Address: P.O. BOX 8006
City-St-Zip: NAPLES, FL 34101 US

Title: S () Delete
Name: DIAZ-PERERA, HILDA L
Address: 5630 COPPER LEAF LANE
City-St-Zip: NAPLES, FL 34116 US

Title: T () Delete
Name: ZULETA, NELSON J
Address: 5630 COPPER LEAF LANE
City-St-Zip: NAPLES, FL 34116

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 Chapter 119, 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: DESIREE KUNIHIO

P

02/02/2007

Electronic Signature of Signing Officer or Director

Date