

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08515

FILED
Apr 23, 2008
Secretary of State

Entity Name: NAPLES WINTERPARK II, INC.

Current Principal Place of Business:

3805 SNOWFLAKE LANE., APT 05
NAPLES, FL 34112 US

New Principal Place of Business:

Current Mailing Address:

745 12TH AVENUE SOUTH
SUITE AA
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 59-2545320

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE PROPERTY MANAGEMENT
745 12TH AVENUE SOUTH
SUITE AA
NAPLES, FL 34102 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: D () Delete
Name: SILVER, RICHARD
Address: 3807 SNOWFLAKE LANE
City-St-Zip: NAPLES, FL 34112

Title: VP () Delete
Name: DEL BOCCIO, BEVERLEY
Address: 3811 SNOWFLAKE LANE
City-St-Zip: NAPLES, FL 34112 US

Title: P () Delete
Name: BONAZZI, JOSEPH
Address: 835 CHARLIEMAGNE BOULEVARD
City-St-Zip: NAPLES, FL 34112

Title: TS () Delete
Name: FORRESTER, JOSEPH
Address: 41 BIRD STREET
City-St-Zip: QUINCY, MA 02169

Title: D () Delete
Name: RILEY, CATHERINE
Address: 23 MARINE STREET
City-St-Zip: QUINCY, MA 021693809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: DEL BOCCIO, BEVERLEY
Address: 3811 SNOWFLAKE LANE
City-St-Zip: NAPLES, FL 34112 US

Title: ST (X) Change () Addition
Name: BONAZZI, JOSEPH
Address: 835 CHARLIEMAGNE BOULEVARD
City-St-Zip: NAPLES, FL 34112

Title: VP (X) Change () Addition
Name: FORRESTER, JOSEPH
Address: 41 BIRD STREET
City-St-Zip: QUINCY, MA 02169

Title: D (X) Change () Addition
Name: LEUPOLD, PETER
Address: 3825 SNOWFLAKE LANE
City-St-Zip: NAPLES, FL 34112

I hereby certify that the information supplied with this filing does not qualify 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: BEVERLY DEL BOCCIO

P

04/23/2008

Electronic Signature of Signing Officer or Director

Date