

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000546

FILED  
Apr 10, 2012  
Secretary of State

**Entity Name:** NAPLES NITES LIONS FOUNDATION, INC.

**Current Principal Place of Business:**

C/O ROBERT WOOMER  
2270A ANCHORAGE LANE  
NAPLES, FL 34104 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ROBERT WOOMER  
2270A ANCHORAGE LANE  
NAPLES, FL 34104 US

**New Mailing Address:**

**FEI Number:** 26-1376476

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WOOMER, ROBERT  
C/O ROBERT WOOMER  
2270A ANCHORAGE LANE  
NAPLES, FL 341044280 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  
**Name:** ARTHUR, WILLIAM  
**Address:** 4200 22ND PLACE SOUTHWEST  
**City-St-Zip:** GOLDEN GATE, FL 34116

**Title:** D  
**Name:** WOOMER, VALERIE  
**Address:** 2270A ANCHORAGE LANE  
**City-St-Zip:** NAPLES, FL 34104

**Title:** D  
**Name:** WOOMER, ROBERT  
**Address:** 2270A ANCHORAGE LANE  
**City-St-Zip:** NAPLES, FL 34104

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:** ROBERT WOOMER

D

04/10/2012

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

\_\_\_\_\_  
Date