## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N09000001782

FILED May 05, 2010 Secretary of State

Entity Name: NAPLES PILOT FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O RUTH FRALICK
4469 BEECHWOOD LAKE DRIVE
NAPLES, FL 34112

C/O MARY ELLEN KOY
2990 39TH ST. S.W
NAPLES, FL 34117

Current Mailing Address: New Mailing Address:

C/O RUTH FRALICK
4469 BEECHWOOD LAKE DRIVE
NAPLES, FL 34112

C/O MARY ELLEN KOY
2990 39TH ST. S.W
NAPLES, FL 34117

FEI Number: 26-4283580 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

FRALICK, RUTH

4469 BEECHWOOD LAKE DRIVE

NAPLES, FL 34112 US

KOY, MARY ELLEN
2990 39TH ST. S.W.
NAPLES, FL 34117 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: MARY ELLEN KOY 05/05/2010

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PRES

Name: KOY, MARY ELLEN Address: 2990 39TH ST. S.W. City-St-Zip: NAPLES, FL 34117

Title: V

 Name:
 SCHWAGER, ROSEMARIE

 Address:
 105 TAHITI STREET

 City-St-Zip:
 NAPLES, FL 34113

Title: T

Name: DICKERSON, PAULETTE
Address: 3552 POINSETTER AVE. A-3
City-St-Zip: NAPLES, FL 34104

City-31-21p. NAPLES, FL 34104

Title: 9

Name: STARK, PATRICIA Address: 290 3RD ST. W.

City-St-Zip: BONITA SPRINGS, FL 34134

Title:

Name: DICKERSON, EVELYN Address: 4158 KATHY AVE. City-St-Zip: NAPLES, FL 34104

Title: [

Name: DEPIRO, ELYSE

Address: 2200 KING ARTHUR COURT City-St-Zip: NAPLES, FL 34112

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: MARY ELLEN KOY PRES 05/05/2010

Electronic Signature of Signing Officer or Director

Date