2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000000375

Entity Name: EDGE OF NAPLES, INC.

FILED Apr 17, 2012 Secretary of State

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

9132 STRADA PLACE THIRD FLOOR 4808 ATLANTIC CT. NAPLES, FL 34108 SUITE 27

CAPE CORAL, FL 33904

Current Mailing Address: New Mailing Address:

9132 STRADA PLACE THIRD FLOOR 4808 ATLANTIC CT.

NAPLES, FL 34108 SUITE 27

CAPE CORAL, FL 33904

FEI Number: 27-4463277 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MYERS, WILLIAM H
C/O PORTER WRIGHT MORRIS & ARTHUR LLP

MACKENZIE, PATRICIA D
4808 ATLANTIC CT

C/O PORTER WRIGHT MORRIS & ARTHUR LLP 4808 ATLANTIC CT 9132 STRADA PLACE THIRD FLOOR SUITE 27

NAPLES, FL 34108 US SUITE 27
CAPE CORAL, FL 33904 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: PATRICIA MACKENZIE 04/17/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

 Name:
 EDWARDS, ANNE L

 Address:
 223 SE 46TH ST

 City-St-Zip:
 CAPE CORAL, FL 33904

Title: VP

Name: SCRIVANICH, JOHN L JR Address: PO BOX 61471 City-St-Zip: FT. MYERS, FL 33906

Title: S

Name: SINGH SWADNER, BRINDA

Address: 28372 DOE ST.

City-St-Zip: PUNTA GORDA, FL 33955

Title: TR

Name: VASKE, RICK

Address: 13200 HAMPTON PARK CT City-St-Zip: FT MYERS, FL 33913

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: ANNE L EDWARDS PRES 04/17/2012