

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27769

FILED
Mar 23, 2009
Secretary of State

Entity Name: NAPLES AREA INTERGROUP, INC.

Current Principal Place of Business:

85 12 ST SOUTH
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

85 12 ST SOUTH
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 68-0058266

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRENKERT, WILLIAM P
525 BAREFOOT WILLIAMS RD.
225
NAPLES, FL 34113 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: C () Delete
Name: KOBZA, AMY
Address: 393 FLAMINGO AVE.
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VC () Delete
Name: SPATAFORA, MARC
Address: 27031 FOREST PK. AVE.
City-St-Zip: NAPLES, FL 34108

Title: T () Delete
Name: WYATT, TAMARA
Address: 1267 SOLANA ROAD
City-St-Zip: NAPLES, FL 34103

Title: S () Delete
Name: BROWN, MARY
Address: 995 9TH AVES #3
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: SPATAFORA, MARC
Address: 27031 FOREST PARK AVE.
City-St-Zip: NAPLES, FL 34108

Title: VC (X) Change () Addition
Name: LUGENBEEL, PETER R
Address: 5 HIGH POINT CIRCLE WEST #210
City-St-Zip: NAPLES, FL 34103

Title: T (X) Change () Addition
Name: CURTIS, JACK
Address: 3270BERMUDS ISLE CIR.
City-St-Zip: NAPLES, FL 34109

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

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: WILLIAM P. STRENKERT

OM

03/23/2009

Electronic Signature of Signing Officer or Director

Date