

# **2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N95000000940

**FILED**  
**Jun 25, 2012**  
**Secretary of State**

**Entity Name:** NAPLES JAZZ SOCIETY, INC.

**Current Principal Place of Business:**

217-B BOBOLINK WAY  
NAPLES, FL 34105 US

**New Principal Place of Business:**

470 18TH AVENUE SOUTH  
NAPLES, FL 34102 US

**Current Mailing Address:**

217-B BOBOLINK WAY  
NAPLES, FL 34105 US

**New Mailing Address:**

470 18TH AVENUE SOUTH  
NAPLES, FL 34102 US

**FEI Number:** 65-0587202

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MAGILL, RICHARD A  
217-B BOBOLINK WAY  
NAPLES, FL 34105 US

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

GOVER, JAMES W DR.  
470 18TH AVENUE SOUTH  
NAPLES, FL 34102 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: JAMES W GOVER

06/25/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: ST,D  
Name: GOVER, JAMES W DR.  
Address: 470 18TH AVENUE SOUTH  
City-St-Zip: NAPLES, FL 34102

Title: P,D  
Name: HANSEN, JAMES DR.  
Address: 5048 CERROMAR DRIVE  
City-St-Zip: NAPLES, FL 34112

Title: VP,D  
Name: MAGILL, RICHARD A  
Address: 217 B BOBOLINK WAY  
City-St-Zip: NAPLES, FL 34105

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: JAMES W GOVER

ST,D

06/25/2012

Electronic Signature of Signing Officer or Director

Date