


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008 8:00 am
Secretary of State

04-29-2008 90079 048 ****61.25

DOCUMENT # N96000001391 1. Entity Name NORTH NAPLES MEDICAL PARK OWNERS' ASSOCIATION, INC.					
Principal Place of Business 350 7TH STREET NORTH NAPLES, FL 34102			Mailing Address P.O. BOX 727 NAPLES, FL 34106		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number NOT APPLICABLE	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent COOPER, KEVIN 350 7TH STREET NORTH NAPLES, FL 34102				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
8. 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. I am familiar with, and accept the obligations of registered agent.				\$8.75 Additional Fee Required	
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering)					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEISS, ALLEN S 350 7TH STREET NORTH NAPLES, FL 34102	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEE ATTACHED LIST
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD COOPER, KEVIN 350 7TH STREET NORTH NAPLES, FL 34102	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HALE, VICKI 350 7TH STREET NORTH NAPLES, FL 34102	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>KEVIN D. COOPER</u> 4-23-08 239-436-5100					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

40088403 ATTACHMENT # N96000001391

William Allyn 350 7 th Street North Naples, FL 34102 Director	Kay F. Gow 350 7 th Street North Naples, FL 34102 Director	Scot C. Schultz 350 7 th Street North Naples, FL 34102 Director
Jay Baker 350 7 th Street North Naples, FL 34102 Director	Fritz Harrington 350 7 th Street North Naples, FL 34102 Director	Edwin Stedem 350 7 th Street North Naples, FL 34102 Secretary/Treasurer/Director
William E. Bindley 350 7 th Street North Naples, FL 34102 Director	Erika Hinson 350 7 th Street North Naples, FL 34102 Director	Norman B. Thomson 350 7 th Street North Naples, FL 34102 Director
Susan L. Dalton 350 7 th Street North Naples, FL 34102 Director	Kim Ciccarelli Kantor 350 7 th Street North Naples, FL 34102 Director	Carl E. Westman 350 7 th Street North Naples, FL 34102 Chairman/Director
Alberto M. de la Rivaherrera MD 350 7 th Street North Naples, FL 34102 Director	Arnold S. Lerner 350 7 th Street North Naples, FL 34102 Director	Allen S. Weiss MD 350 7 th Street North Naples, FL 34102 President & CEO
Paul D. Dernbach MD 350 7 th Street North Naples, FL 34102 Director	Scott Lutgert 350 7 th Street North Naples, FL 34102 Director	Kevin D. Cooper 350 7 th Street North Naples, FL 34102 Chief of Staff/General Counsel
Brian Doyle 350 7 th Street North Naples, FL 34102 Director	Gerri Moll 350 7 th Street North Naples, FL 34102 Director	Vicki D. Hale 350 7 th Street North Naples, FL 34102 Assistant Treasurer/CFO
Linda Flewelling 350 7 th Street North Naples, FL 34102 Director	John M. Morrison 350 7 th Street North Naples, FL 34102 Director	Philip C. Dutcher 350 7 th Street North Naples, FL 34102 Chief Operations Officer NCH Healthcare System
Thomas J. Gazdic 350 7 th Street North Naples, FL 34102 Director	Wayne Mullican 350 7 th Street North Naples, FL 34102 Director	Gail A. Dolan 350 7 th Street North Naples, FL 34102 Chief Operating Officer NCH North Naples Hospital Campus
Daniel E. Gill 350 7 th Street North Naples, FL 34102 Director	Joseph I. Perkovich 350 7 th Street North Naples, FL 34102 1 st Vice Chair/Director	Aurora Estevez MD 350 7 th Street North Naples, FL 34102 Chief Medical Officer
Ellin Goetz 350 7 th Street North Naples, FL 34102 Director	Rabbi James Perman 350 7 th Street North Naples, FL 34102 Director	Susan B. Wolff 350 7 th Street North Naples, FL 34102 Chief Information Officer
Beth Martin 350 7 th Street North Naples, FL 34102 Assistant Secretary	Brian C.G. Settle 350 7 th Street North Naples, FL 34102 Chief Human Resources Officer	Stephen Schwartz 350 7 th Street North Naples, FL 34102 2 nd Vice Chair/Director