

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006583

FILED  
Feb 17, 2011  
Secretary of State

**Entity Name:** THE CAFESJIAN FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

2400 9TH STREET NORTH  
SUITE 401  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

2400 9TH STREET NORTH  
SUITE 401  
NAPLES, FL 34103

**New Mailing Address:**

**FEI Number:** 59-3417473

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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: PD  
Name: CAFESJIAN, GERARD L  
Address: 2400 9TH STREET NORTH, SUITE 401  
City-St-Zip: NAPLES, FL 34103

Title: VD  
Name: CAFESJIAN, CLEO T  
Address: 2400 9TH STREET NORTH, SUITE 401  
City-St-Zip: NAPLES, FL 34103

Title: D  
Name: DEASE, DENNIS FATHER  
Address: 2400 9TH STREET NORTH, SUITE 401  
City-St-Zip: NAPLES, FL 34103

Title: D  
Name: SCALLEN, STEPHEN  
Address: 2400 9TH STREET NORTH, SUITE 401  
City-St-Zip: NAPLES, FL 34103

Title: D  
Name: VARTIAN, ROSS  
Address: 2400 9TH STREET NORTH, SUITE 401  
City-St-Zip: NAPLES, FL 34103

Title: AT  
Name: JONES, GARY  
Address: 2400 9TH STREET NORTH, SUITE 401  
City-St-Zip: NAPLES, FL 34103

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: GARY JONES

AT

02/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date

02/23/2011

11:17

GLC-TOMKOT-CEE-MANDERBILT 18592435017 PPF08

NP.291

001

N96000006583

15 South Fifth Street  
Suite 900  
Minneapolis, MN 55402  
Phone: 612-359-8991  
Fax: 612-359-8984

**Cafesjian Family Foundation**

# Fax

2/17/11

**To:** Florida Department of State

**From:** Gary Jones

Assistant Treasurer

**Fax:** 850-245-6017

**Date:** February 23, 2011

**Phone:**

**Pages:** 1

**Re:** N96000006583 Document Number

**CC:**

☐ **Urgent**    ☐ **For Review**    ☐ **Please Comment**    ☐ **Please Reply**    ☐ **Please Recycle**

Please add the following Director to the 2011 Annual Report for The Cafesjian Family Foundation, Inc.:

**Title:** D

**Name:** Melville, James C.

**Address:** 2400 9<sup>th</sup> Street North, Suite 401

**City-St-Zip:** Naples, FL 34103