## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000002012

FILED Apr 30, 2009 Secretary of State

Entity Name: GENE DOYLE MEMORIAL FOUNDATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 375 COCOHATCHEE DRIVE NAPLES, FL 34110 **Current Mailing Address: New Mailing Address:** 3201 70TH STREET SW 375 COCOHATCHEE DR. NAPLES, FL 34105 NAPLES, FL 34110 FEI Number: 59-3539829 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: NAPLES-LAWDOCK, INC. VANAS, JAMES J 375 COCOHATCHEE DR. 1395 PANTHER LANE SUITE 300 NAPLES, FL 34110 NAPLES, FL 34109 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 J VANAS 04/30/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete DOYLE, ROBERT E JR Name: Name: 3201 - 70TH STREET SW Address: Address: City-St-Zip: NAPLES, FL 34105 City-St-Zip: Title: () Delete Title: () Change () Addition DOYLE, KRISTINA Name: Name: Address: 3201 70TH ST SW Address: City-St-Zip: NAPLES, FL 34105 City-St-Zip: Title: () Delete Title: () Change () Addition VANAS, JAMES J Name: Name: 375 COCOHATCHEE LANE Address: Address: City-St-Zip: NAPLES, FL 34110 City-St-Zip: ( ) Delete Title: Title: () Change () Addition VANAS, PAM Name: Name: 375 COCOHATCHEE LANE Address: Address: City-St-Zip: NAPLES, FL 34110 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: JAMES J VANAS D 04/30/2009