2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005417

FILED Feb 04, 2009 Secretary of State

Entity Name: FRIENDS OF THE NAPLES MUNICIPAL AIRPORT, INC.

Current Principal Place of Business: New Principal Place of Business:

200 AVIATION DRIVE NORTH #7 NAPLES, FL 34104

Current Mailing Address: New Mailing Address:

200 AVIATION DRIVE NORTH #7 C/O CAMERON R.E., 1250 N TAMIAMI TRAIL

NAPLES, FL 34104 SUITE #101 NAPLES, FL 34102

FEI Number: 59-3599804 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NAPLES-LAWDOCK, INC. 1395 PANTHER LANE SUITE 300 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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

FAY, CATHERINE WEST, ERIC Name: Name: 100 AVIATION DRIVE SOUTH #101 Address: P O BOX 220 Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip: NAPLES, FL 34106

Title: TD Title: (X) Change () Addition () Delete

Name: WEST, ERIC Name: CAMERON, R. SCOTT Address: P.O BOX 220 Address: 1250 N. TAMIAMI TRAIL, #101 City-St-Zip: NAPLES, FL 34106 City-St-Zip: NAPLES, FL 34102

Title: (X) Delete Title: () Change () Addition

CAMERON, R. SCOTT Name: Name: 1250 N. TAMIAMI TRAIL, SUITE 101 Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip:

Title: VD (X) Delete Title: () Change () Addition

Name: BELCHER, SHERRY Name: Address: 1508 TREELINE DRIVE Address: City-St-Zip: NAPLES, FL 34119 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: R. SCOTT CAMERON PD 02/04/2009