### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 728662** 

Entity Name: THE LAURENTIANS OF NAPLES, INC.

FILED Feb 06, 2015 Secretary of State CC7106329065

# **Current Principal Place of Business:**

C/O WIEBEL, HENNELLS & CARUFE, PLLC 9420 BONITA BEACH ROAD STE 200 BONITA SPRINGS, FL 34135

# **Current Mailing Address:**

C/O WIEBEL, HENNELLS & CARUFE, PLLC 9420 BONITA BEACH ROAD STE 200 BONITA SPRINGS, FL 34135 US

FEI Number: 59-1606462 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WIEBEL, HENNELLS & CARUFE, PLLC 9420 BONITA BEACH ROAD STE 200 BONITA SPRINGS, FL 34135 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: WEIBEL, HENNELLS & CARUFE

02/06/2015

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title SECRETARY Title VF

Name GRUMHAUS, DAVID Name MASTERSON, JOE

Address 1285 GULFSHORE BLVD N, # 4-B Address 1285 GULF SHORE BLVD. N #8-B

City-State-Zip: NAPLES FL 34102 City-State-Zip: NAPLES FL 34102

Title TREASURER Title PRESIDENT

NameSPEARS, JOHNNameHAYWARD, THOMAS Z. JR.Address1285 GULF SHORE BLVD. N #7-AAddress1285 GULF SHORE BLVD. #6CCity-State-Zip:NAPLES FL 34102City-State-Zip:NAPLES FL 34102-4963

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.

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