

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000008873

**Entity Name:** CREW NAPLES - FT. MYERS, INC.**Current Principal Place of Business:**

C/O SUE CHRISTOPHER  
CLIFTONLARSONALLEN LLP 4099 TAMIAMI TR, NORTH #300  
NAPLES, FL 34103

**Current Mailing Address:**

C/O SUE CHRISTOPHER  
CLIFTONLARSONALLEN LLP 4099 TAMIAMI TR, NORTH #300  
NAPLES, FL 34103 US

**FEI Number:** 26-1612255**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

GOLDMAN, ELLEN A ESQ.  
% PORTER, WRIGHT, MORRIS & ARTHUR LLP  
9132 STRADA PLACE, THIRD FLOOR  
NAPLES, FL 34108 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:** ELLEN A. GOLDMAN

02/01/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MOORE, LORI  
Address        2320 FIRST ST, SUITE 1000  
City-State-Zip: FORT MYERS FL 33901

Title            SECRETARY  
Name            SCOTT, DEBORAH  
Address        12140 CARISSA COMMERCE COURT,  
                 SUITE 102  
City-State-Zip: FT MYERS FL 33966

Title            PRESIDENT-ELECT  
Name            ANKENEY, MICHELE  
Address        1614 COLONIAL BOULEVARD, SUITE  
                 101  
City-State-Zip: FT. MYERS FL 33907

Title            DIRECTOR  
Name            ROACH, JOANNE  
Address        2590 NORTHBROOKE PLAZA DR, STE  
                 305  
City-State-Zip: NAPLES FL 34119

Title            TREASURER  
Name            CHRISTOPHER, SUSAN  
Address        C/O CLIFTONLARSONALLEN LLP  
                 4099 TAMIAMI TR, NORTH #300  
City-State-Zip: NAPLES FL 34103

Title            DIRECTOR  
Name            CONROY, KRISTIN  
Address        2210 VANDERBILT BEACH RD #1201  
City-State-Zip: NAPLES FL 34109

Title            DIRECTOR  
Name            KADEN, LYNN  
Address        5935 SHILOH RD E STE 200  
City-State-Zip: ALPHARETTA GA 30005

Title            DIRECTOR  
Name            SPIEGEL, ELENA  
Address        4683 LAREDO AVE  
City-State-Zip: FORT MYERS FL 33905

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*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:** SUSAN CHRISTOPHER

TREASURER

02/01/2016

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	VANOVER, ERICA
Address	4851 TAMIAMI TRL N #201
City-State-Zip:	NAPLES FL 34103