

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15106

Entity Name: NAPLES WINTERPARK NORTH, INC.**Current Principal Place of Business:**5603 NAPLES BLVD.
NAPLES, FL 34109**Current Mailing Address:**5603 NAPLES BLVD.
NAPLES, FL 34109**FEI Number:** 59-2735479**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MOORE PROPERTY MANAGEMENT
5603 NAPLES BLVD.
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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	DIRECTOR
Name	WALSH, ALAN
Address	3450 FROSTY WAY # 6
City-State-Zip:	NAPLES FL 34112

Title	PRESIDENT
Name	WALDRON, MARK
Address	3430 FROSTY WAY #6
City-State-Zip:	NAPLES FL 34112

Title	TREASURER
Name	WALSH, KEVIN
Address	3450-10 FROSTY WAY
City-State-Zip:	NAPLES FL 34112

Title	SECRETARY
Name	KANDHAI, CHANDRA
Address	3420 FROSTY WAY APT 11
City-State-Zip:	NAPLES FL 34112

Title	DIRECTOR
Name	WEGNER, MARGUERITE
Address	3460-6 FROSTY WAY
City-State-Zip:	NAPLES FL 34112

Title	VP
Name	TUFFO, GABRIEL
Address	3420 FROSTY WAY
City-State-Zip:	NAPLES FL 34112

Title	DIRECTOR
Name	KIRKPATRICK, BILLIE LOUISE
Address	829 MAYWOOD DRIVE
City-State-Zip:	ST. CLOUD MN 50303

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: MARK WALDRON**PRESIDENT****04/16/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date