

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000009864

**Entity Name:** ALBANIAN AMERICAN ORGANIZATION OF SW FLORIDA, INC

**FILED**  
**Jan 17, 2024**  
**Secretary of State**  
**3355173409CC**

**Current Principal Place of Business:**

1855 VETERANS PARK DRIVE  
SUITE 301  
NAPLES, FL 34109

**Current Mailing Address:**

1855 VETERANS PARK DRIVE  
SUITE 301  
NAPLES, FL 34109

**FEI Number: 82-3009838**

**Certificate of Status Desired: No**

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

PURO, GENTIAN  
335 MELROSE PL  
NAPLES, FL 34104 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:** GENTIAN PURO

01/17/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name PLEPI , ERJOLA  
Address 3300 BERMUDA ISLE CIR., APT 320  
City-State-Zip: NAPLES FL 34109

Title TREASURER  
Name ALIKO-SELFOLLARI , SILVANA  
Address 1465 MARIPOSA CIRCLE #103  
City-State-Zip: NAPLES FL 34105

Title SECRETARY  
Name XHOXHI, ENIADA  
Address 1415 TIFFANY LANE #1308  
City-State-Zip: NAPLES FL 34105

*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:** ENIADA XHOXHI

**PRESIDENT**

01/17/2024

Electronic Signature of Signing Officer/Director Detail

Date