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Electronic Signature of Signing Officer/Director Detail

## 2018 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

### DOCUMENT# F22515

Entity Name: PENINSULA IMPROVEMENT CORPORATION

## **Current Principal Place of Business:**

2600 GOLDEN GATE PARKWAY NAPLES. FL 34105

## **Current Mailing Address:**

2600 GOLDEN GATE PARKWAY NAPLES, FL 34105 US

## FEI Number: 59-2072898

# Name and Address of Current Registered Agent:

BOAZ, BRADLEY 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105 US

Electronic Signature of Registered Agent

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.

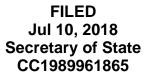
### SIGNATURE:

Officer/Director Detail :					
Title	V/S/T	Title	C/D		
Name	BOAZ, BRADLEY A	Name	COLLIER, BARRON III G		
Address	2600 GOLDEN GATE PARKWAY	Address	2600 GOLDEN GATE PARKWAY		
City-State-Zip:	NAPLES FL 34105	City-State-Zip:	NAPLES FL 34105		
Title	V	Title	V		
Name	SONALIA, JEFF	Name	BAIRD, DOUGLAS E		
Address	2600 GOLDEN GATE PARKWAY	Address	2600 GOLDEN GATE PARKWAY		
City-State-Zip:	NAPLES FL 34105	City-State-Zip:	NAPLES FL 34105		
Title	V	Title	Ρ		
Name	GOGUEN, BRIAN L	Name	GABLE, R. BLAKESLEE		
Address	2600 GOLDEN GATE PARKWAY	Address	2600 GOLDEN GATE PARKWAY		
City-State-Zip:	NAPLES FL 34105	City-State-Zip:	NAPLES FL 34105		
Title	V	Title	DIRECTOR		
Name	GENSON, DAVID B	Name	SPROUL, KATHERINE G		
Address	2600 GOLDEN GATE PARKWAY	Address	2600 GOLDEN GATE PARKWAY		
City-State-Zip:	NAPLES FL 34105	City-State-Zip:	NAPLES FL 34105		

## Continues on page 2

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

## SIG



Certificate of Status Desired: No

Date

07/10/2018 Date

### **Officer/Director Detail Continued :**

Title	D	Title	D
Name	VILLERE, LAMAR G	Name	ALDEN, PHYLLIS G
Address	2600 GOLDEN GATE PARKWAY	Address	2600 GOLDEN GATE PARKWAY
City-State-Zip:	NAPLES FL 34105	City-State-Zip:	NAPLES FL 34105
Title	D	Title	DIRECTOR
Name	KUNDE, CHELSEA	Name	SPROUL, JULIET A
Address	2600 GOLDEN GATE PARKWAY	Address	2600 GOLDEN GATE PARKWAY
City-State-Zip:	NAPLES FL 34105	City-State-Zip:	NAPLES FL 34105
Title	VP	Title	AV
Name	ENGLISH, JOHN C	Name	KENNEDY, KELLY
Address	2600 GOLDEN GATE PKWY	Address	2600 GOLDEN GATE PARKWAY
City-State-Zip:	NAPLES FL 34105	City-State-Zip:	NAPLES FL 34105