FILED

Feb 22, 1999 8:00 am Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

ı	1999	2 CO WE T	50	DIVISION OF CORPO	DRAT	IONS	02-22-1999 90132 043 ****61.25
	MENT	# 730625					
VANDER	RUTRE	ACH FLOTILLA, INC					78082 · 2012 · 20
VANDLI	IDILI DE	TOTAL COLLEGE	,•				DEPARTMENT OF STATE
Principal Plac	e of Busines	s	N	Mailing Address			
C W WHITE C W WHITE) IBBANG IBBAR NGUN BANG BANG KIRAK BEN BEN BIRAK
1806 PRINCESS CT				806 PRINCESS CT			
NAPLES FL 33942 US				NAPLES FL 33942 US			
US				,			
2. Principal Place of Business				Mailing Address			3. Date Incorporated or Qualifed
21			26]			09/09/1974
Suite, Apt.	#, etc.			Suite, Apt. #, etc.			4. FEI Number Applied For
22			27				65-0135264 Not Applicable
City & Sta	te			City & State			5. Certificate of Status Desired \$8.75 Additional
23			28				Fee Required
Zip		Country	\vdash	. ' —	ountry	′	6. Election Campaign Financing \$5.00 May Be
24		25	29				Trust Fund Contribution Added to Fees 10. Name and Address of New Registered Agent
	9. Name	and Address of Curren	t Kegi	stered Agent	81	Name	
					82	<u> </u>	
MCDONALD, STANLEY A.						Street	Address (P.O. Box Number is Not Acceptable)
483 THIRD STREET S. NAPLES FL 33940					83		
NAPLES	FL 33940						
i					84	City	FL 85 Zip Code
11. Pursuant	t to the provi	sions of Sections 617.050	2 and	617.1508, Florida Statutes, the	abov	e-named	corporation submits this statement for the purpose of changing its registered
				ida. Such change was authoriz if, Section 617.0503, Florida Si			oration's board of directors. I hereby accept the appointment as registered
SIGNATURE		,		,			
	Signature, type	or printed name of registered ager			_	nt signature r	required when reinstating) DATE TO OFFICE SAME PURE CTORS IN 12
12.		OFFICERS AN	D DIR		3.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE	P				TITLE		-
NAME	1	LL, JOHN F			NAME	T ADDRESS	HILL, CURTIS B 10288 WILD TURKEY AVE
STREET ADDRESS	NAPLES	LEON DR			CITY-S		BONITA SPRIUSS, FL 34/35
CITY-ST-ZIP	ST	FL 34102			TITLE	11-21	Change Additi
NAME		HARLES W		_	NAME		
STREET ADDRESS		NCESS CT		2:	STREE	TADORESS	
CITY-ST-ZIP	NAPLES			2.	4 CITY-	ST-ZIP	
TITLE	VP			☐ DELETE 3.	TITLE		V P ☑ Change ☐ Additi
NAME	BROKAW	, HAL		3.3	NAME		JOHNSON, W.R.
STREET ADDRESS	13721 TO	inbridge dr		3.3	STREE	T ADDRESS	
CITY-ST-ZIP	BONITA :	SPRINGS FL 34135			CITY-S	ST-ZIP	NAPLES, FL 34110
TITLE	T			☐ DELETE 4.	TITLE		✓ Change ☐ Additi
NAME		n, william			2 NAME		Brokaw, HAL
STREET ADDRESS		LERBILT ROAD F-11				T ADDRESS	
CITY-ST-ZIP	NAPLES	FL			CITY-S	ST-ZIP	BONITA SPRINCS, FL 34135
TITLE	DD4DD:	M F D			NAME		MADSHAIL JOHN F.
NAME CIDEET ADDRESS	BRADBU	·				T ADDRESS	MARSHAIL, JOHN F. 1741 GAILSON DR
STREET ADDRESS	525 RIDG NAPLES				CITY-S		NAPLES. FL 3410Z
CITY-ST-ZIP TITLE	T	<u> </u>			TITLE		Change ☐ Additi
NAME	DUNLAP,	KE		6.:	NAME		HEISTEIN, B. LOHN
STREET ADDRESS		REFOOT LANE		6.	STREE	T ADDRESS	3834 WOODLAKE DR. EW

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered. CITY-ST-ZIP

SIGNATURE:



CHARLES W. WHITE 1/4/99 941-566-1003