2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # 742837** Jun 08, 2000 08:00 AM 1. Entity Name **Secretary of State** NAPLES BAY ROTARY CLUB, INC. Principal Place of Business Mailing Address 2660 AIRPORT ROAD SOUTH 2660 AIRPORT ROAD SOUTH NAPLES FL NAPLES FL 34112 34112 US 2. Principal Place of Business 3. Mailing Address PO BOX 1852 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For NAPLES FL 23-7369854 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired X Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BROWN 2660 AIRPORT RD S Street Address (P.O. Box Number is Not Acceptable) NAPLES FL34112 Zip Code 8. 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. 06/08/2000 **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to . . \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delate TITLE ☐ Addition NAME PFAFF DAVID NAME STREET ADDRESS 696 16TH AVE S STPEET ADDRESS CITY-ST-ZIP NAPLES FL34102 CITY-ST-ZIP TITLE TD ☐ Delete TD | Change ☐ Addition NAME TIMOTHY NAME TIMOTHY J MCLEAN MCLEAN STREET ADDRESS 2026 7TH STREET SOUTH STREET ADDRESS 4851 TAMIAMI TRAIL NORTH CITY-ST-ZIP NAPLES 34102 CITY-ST-ZIP NAPLES \mathbf{FL} 34103 TITLE ☐ Delete TITLE SD SD X Change Addition NAME NAME KOONTZ DARLENE HAYES HUGH STREET ADDRESS 5007 TAMIAMI TRAIL E STREET ADDRESS 3190 70TH ST. SW CITY-ST-ZIP NAPLES FL 34113 CITY-ST-ZIP NAPLES \mathbf{FL} 34105 TITLE VD ☐ Delete TITLE vъ XI Change ☐ Addition NAME JONES WILLIAM GRAHAM ARTHUR STREET ADDRESS 3500 RADIO RD STREET ADDRESS 2397 KINGS LAKE BLVD. CITY-ST-ZIF NAPLES 34104 CITY-ST-ZIP NAPLES 34112 TITLE ☐ Delete TITLE D D X Change ☐ Addition NAME COMBS DENNIS NAR/F LARA MIKE STREET ADDRESS 1500 AIRPORT RD. S. STREET ADDRESS 1170 3RD ST. SOUTH CITY-ST-ZIP NAPLES FL. 34104 CITY-ST-ZIP NAPLES EL. 34102 TITLE PD ☐ Delete TITLE ☐ Addition PD XI Change NAME BROWN THOMAS MILLER

FL 34112

STREET ADDRESS

CITY-ST-ZIP

971 AIRPORT RD. NORTH

34104

NAPLES

STREET ADDRESS

CITY-ST-ZIP

2660 AIRPORT RD. S.

^{12.} I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

MILLER, TIM 971 AIRPORT RD. NORTH

NAPLES, FL. 34112

JAIN, KRIS 4439 LAKEWOOD BLVD.

NAPLES, FL. 34112