


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT


FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # N00000000524
 1. Entity Name
 THE LUTGERT FOUNDATION, INC.



Principal Place of Business: 4200 GULF SHORE BOULEVARD NORTH, NAPLES, FL 34103
 Mailing Address: 4200 GULF SHORE BOULEVARD NORTH, NAPLES, FL 34103

DO NOT WRITE IN THIS SPACE



03112004 No Chg-NP CR2E037 (10/03)
 4. FEI Number: 59-3719019 Applied For: Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 CATALANO, ANTHONY J
 4001 TAMiami TRAIL NORTH
 STE 250
 NAPLES, FL 34103

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
 Due by May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

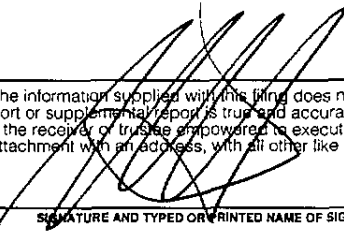
10. OFFICERS AND DIRECTORS

TITLE	D
NAME	LUTGERT, RAYMOND L
STREET ADDRESS	4200 GULF SHORE BOULEVARD NORTH
CITY - ST - ZIP	NAPLES, FL 34103
TITLE	D
NAME	LUTGERT, SCOTT F
STREET ADDRESS	4200 GULF SHORE BOULEVARD NORTH
CITY - ST - ZIP	NAPLES, FL 34103
TITLE	D
NAME	GUTMAN, HOWARD B
STREET ADDRESS	4200 GULF SHORE BOULEVARD NORTH
CITY - ST - ZIP	NAPLES, FL 34103
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U00000141205
 04/30/04-80001-004 61.25

DO NOT WRITE IN THIS SPACE

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

SIGNATURE:  Howard B. Gutman 4/27/04 (239) 261-6100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #