


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 07, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # N0000008147  
 1. Entity Name  
 GEBHARDT FOUNDATION, INC.



Principal Place of Business  
 5601 TURTLE BAY DRIVE  
 NAPLES, FL 34108

Mailing Address  
 ART GEBHARDT C/O M&I  
 800 LAUREL OAK DR. STE 101  
 NAPLES, FL 34108

**DO NOT WRITE IN THIS SPACE**



02032007 No Chg-NP CR2E037 (4/06)

4. FEI Number  
 65-1059870

Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 MARSHALL & ILSLEY TRUST COM NA  
 800 LAUREL OAK DR  
 STE 101  
 NAPLES, FL 34108

**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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

**Filing Fee is \$61.25**  
**Due by May 1, 2007**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GEBHARDT, ARTHUR A 5601 TURTLE BAY DRIVE NAPLES, FL 34108
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GEBHARDT, PATRICIA A 5601 TURTLE BAY DRIVE NAPLES, FL 34108
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD NYGAARD, ELLEN C 1827 ROYAL OAK DRIVE LYNCHBURG, VA 24503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HAMMILL, SARAH 425 W. APPLETREE COURT 99N MEQUON, WI 530926201
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000625253  
 02/14/07-80068-004 61.25

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Roger W. Mjoen* 2/5/2007 (239) 592-2461  
 \_\_\_\_\_ Date Daytime Phone #  
 ROGER W. MJOEN