

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2001 8:00 am
Secretary of State
 02-19-2001 90050 049 ****61.25

0072472

DOCUMENT # N94000005489

1. Entity Name

ROTARY CLUB OF BONITA SPRINGS NOON, INC.

Principal Place of Business

Mailing Address

**7663 MILL STREAM DR
 NAPLES FL 34109**

**7663 MILL STREAM DR
 NAPLES FL 34109**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

**ROACH, PHILLIP
 7663 MILL STREAM DR
 NAPLES FL 34109**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	☒ Delete
NAME	ROACH, PHILLIP A	
STREET ADDRESS	7663 MILL STREAM DRIVE	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	D	☐ Delete
NAME	MEASE, ROD	
STREET ADDRESS	26977 MCLAUGHLIN BLVD.	
CITY-ST-ZIP	BONITA SPRINGS FL 34134	
TITLE	D	☒ Delete
NAME	JABLONSKI, JOHN	
STREET ADDRESS	706 MAINSAIL PLACE	
CITY-ST-ZIP	NAPLES FL 34110	
TITLE	D	☐ Delete
NAME	VALEGO, TONY	
STREET ADDRESS	61 EMERALD WOODS DR #D10	
CITY-ST-ZIP	NAPLES FL 34108	
TITLE	D	☐ Delete
NAME	PRIOLETTI, MIKE	
STREET ADDRESS	2550 COACHHOUSE LANE	
CITY-ST-ZIP	NAPLES FL	
TITLE	D	☐ Delete
NAME	ACKERMAN, MARK	
STREET ADDRESS	6840 SABLE RIDGE LANE	
CITY-ST-ZIP	NAPLES FL 34109	

TITLE		☐ Change ☒ Addition
NAME	Nancy P. Kiefer	
STREET ADDRESS	25071 Chamber of Commerce Dr.	
CITY-ST-ZIP	Bonita Springs, FL 34135	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/01

Date

Daytime Phone #

CR2E037 (10/00)