

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2005 8:00 am
Secretary of State

02-14-2005 90077 011 ****61.25

DOCUMENT # N94000005489	
1. Entity Name ROTARY CLUB OF BONITA SPRINGS NOON, INC.	

Principal Place of Business PO BOX 1092 BONITA SPRINGS, FL 34133	Mailing Address PO BOX 1092 BONITA SPRINGS, FL 34133
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50015341



2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

02102005 Chg-NP CR2E037 (10/03)

City & State	City & State
Zip	Country

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
ROACH, PHILLIP 28179 VANDERBILT DR #1 BONITA SPRINGS, FL 34134	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE	DATE
(NOTE: Registered Agent signature required when reinstating)	

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
P JABLONSKI, JOHN 706 MAIN SAIL PLACE NAPLES, FL 34110	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
D AGIUS, STEVE 14490 OLD HICKORY BLVD FT MYERS, FL 33912	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
DS PRIOLETTI, MIKE 2550 COACH HOUSE LANE NAPLES, FL 34105	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
VP DAVEY-HADAWAY, BARBARA 18249 HUCKLEBERRY FT MYERS, FL 33912	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
D BARR, EMMIE 3561 LAKEMONT DR BONITA SPRINGS, FL 34134	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
T Douglas E. Wiebel 9420 Bonita Beach Rd. Suite 200 Bonita Springs, FL 34135	

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: <i>Douglas E. Wiebel</i>	DATE: 2/10/05	DAYTIME PHONE: 239-992-6241
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		