

FILE NOW: FILING FEE IS \$61.25

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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **N22566** (6)  
1. Corporation Name  
**SUPPORTERS OF DEL-NOR WIGGINS PARK, INC.**

98 FEB -4 PM 12:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business Mailing Address  
**DELNOR-WIGGINS PASS SRA**  
**111000 GULF SHORE DRIVE NORTH**  
**NAPLES FL 33963**

3. Date Incorporated or Qualified

09/18/1987

4. FEI Number

65-0013222

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MIKTUK, ROSEMARY**  
**4680 FIJI LANE**  
**BONITA SPRINGS FL 34134**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME **DP**  
STREET ADDRESS **MIKTUK, ROSEMARY**  
CITY-ST-ZIP **4680 FIJI LANE**  
**BONITA SPRINGS FL 34134**

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME **DV**  
STREET ADDRESS **SMITH, BARBARA**  
CITY-ST-ZIP **810 97 AVE N**  
**NAPLES FL 34108**

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ☒ DELETE  
NAME **DS**  
STREET ADDRESS **MCCOY, JOYCE**  
CITY-ST-ZIP **549 PALM RIVER DR**  
**NAPLES FL 33942**

3.1 TITLE ☐ Change ☒ Addition  
3.2 NAME **50 Ronald Kulpa**  
3.3 STREET ADDRESS **766 Wiggins Bay Dr**  
3.4 CITY-ST-ZIP **Naples, FL 34108**

TITLE ☐ DELETE  
NAME **DT**  
STREET ADDRESS **PELEY, KAY**  
CITY-ST-ZIP **586 NORTH 106 AVENUE**  
**NAPLES FL 33963**

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☒ DELETE  
NAME **D**  
STREET ADDRESS **CHATHAM, JIMMY**  
CITY-ST-ZIP **310 NW 12 AVE**  
**NAPLES FL 33964**

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME **John Brennan**  
5.3 STREET ADDRESS **703 107th Ave N**  
5.4 CITY-ST-ZIP **Naples, FL 34108**

TITLE ☐ DELETE  
NAME **D**  
STREET ADDRESS **WEST, EDNA**  
CITY-ST-ZIP **708 107 AVENUE NORTH**  
**NAPLES FL 33963**

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Rosemary Miktuk*

1-21-98

(941) 992-1222

CR2E037 (10/97)



Lawton Chiles  
Governor

Department of  
**Environmental Protection**

N22566  
Marjory Stoneman Douglas Building  
900 Commonwealth Boulevard  
Tallahassee, Florida 32399-3000

Virginia B. Wetherell  
Secretary

February 3, 1998

Mr. David Mann, Director  
Division of Corporations  
Department of State  
Post Office Box 6327  
Tallahassee, FL 32314

Dear Mr. Mann:

This letter is to certify to you that Supporters Of Del-Nor Wiggins Park, Inc., is a duly authorized citizen support organization which is under contract to provide support for the Division of Recreation and Parks in accordance with Section 258.015, F.S.

Sincerely,

Fran P. Mainella, CLP  
Director  
Division of Recreation and Parks

FPM/paw  
Attachments