

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N22566 1. Entity Name SUPPORTERS OF DEL-NOR WIGGINS PARK, INC.				FILED 05 APR 21 PM 1:26 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business DELNOR-WIGGINS PASS SRA 111000 GULF SHORE DRIVE NORTH NAPLES, FL 33963		Mailing Address DELNOR-WIGGINS PASS SRA 111000 GULF SHORE DRIVE NORTH NAPLES, FL 33963			
2. Principal Place of Business Delnor-Wiggins Pass SRA Suite, Apt. #, etc. 11100 Gulfshore Dr.		3. Mailing Address Delnor-Wiggins Pass SRA Suite, Apt. #, etc. 11100 Gulfshore Dr.		03252005 Chg-NP CR2E037 (10/03)	
City & State Naples, FL		City & State Naples, FL		4. FEI Number 65-0013222	
Zip 34108		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MIKTUK, ROSEMARY 4680 FIJI LANE BONITA SPRINGS, FL 34134			7. Name and Address of New Registered Agent Name <u>Cantwell, Lois</u> Street Address (P.O. Box Number is Not Acceptable) <u>684 Wiggins Lake Dr. #102</u> City <u>Naples</u> FL <u>34110</u>		
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 <u>Lois Cantwell</u> 3/27/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MIKTUK, ROSEMARY 4680 FIJI LANE BONITA SPRINGS, FL 34134	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Cantwell, Lois 684 Wiggins Lake Dr. #102 Naples, FL 34110	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV SADOWSKI, EDIE 568 111TH AVE N NAPLES, FL 34120	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sadowski, Edie 568 111th Ave N Naples, FL 34108	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KULPA, HEIDI 766 WIGGINS BAY DR NAPLES, FL 34108	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Lubic, Sherry 389 Mallory Ct. Naples, FL 34110	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT PELEY, KAY 586 NORTH 108 AVENUE NAPLES, FL 33963	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Nye, Phil 11 Bluebill Ave. Naples, FL 34108	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CATALDO, PAULINE 662 107TH AVE NAPLES, FL 334108	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Paul, William 551 Cypress Way Naples FL 34110	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEST, EDNA 706 107 AVENUE NORTH NAPLES, FL 33963	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Erb, Joan 760 31st NW Naples, FL 34120	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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: <u>Lois Cantwell</u> <u>Lois Cantwell</u>			Date <u>3/27/05</u>		Daytime Phone # <u>239-596-6216</u>



Jeb Bush
Governor

Department of Environmental Protection

Marjory Stoneman Douglas Building
3900 Commonwealth Boulevard
Tallahassee, Florida 32399-3000

Colleen M. Castille
Secretary

April 14, 2005

Mr. Sean Toner
Division of Corporations
Florida Department of State
409 East Gaines Street
Tallahassee, Florida 32399

Dear Mr. Toner:

This letter is to certify to you that the 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. Pursuant to F.S. 617.0122, this filing is exempt from any fees when certified by this department.

After filing, please return certified documents to Phillip Werndli at the above address, MS 535. If further information is needed feel free to call him at 245-3098.

Sincerely,

Mike Bullock
Director
Florida Park Service

MB/pwf

Attachments