2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04000005494

Entity Name: NORTH FORT MYERS ACADEMY ARTS FOUNDATION, INC.

FILED
Aug 15, 2018
Secretary of State
CC6510246902

Current Principal Place of Business:

1856 ARTS WAY

NORTH FORT MYERS, FL 33917

Current Mailing Address:

1856 ARTS WAY

NORTH FORT MYERS, FL 33917 US

FEI Number: 20-1665545 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SANTINI, DOUGLAS 1838 SW 8TH COURT CAPE CORAL, FL 33991 US

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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT	Title	SECRETARY

NameBUNGARD, HEIDINameWALTERS, MARGARETAddress3433 MALAGROTTA CIRCLEAddress1221 NW 25TH AVECity-State-Zip:CAPE CORAL FL 33909City-State-Zip:CAPE CORAL FL 33993

Title DIRECTOR Title DIRECTOR

NameFLAHERTY, JULIENameMILLINS, THOMAS DR.Address966 HYACINTH ST.Address1245 CARLENE AVE.City-State-Zip:NORTH FORT MYERS FL 33903City-State-Zip: FORT MYERS FL 33901

TitleDIRECTORTitleCHAIRMANNameSANTINI, DOUGLAS DR.NameBRUNO, ADAMAddress1838 SW 8TH CT.Address2008 GRAY CT.

City-State-Zip: CAPE CORAL FL 33914 City-State-Zip: NORTH FORT MYERS FL 33903

Title DIRECTOR Title DIRECTOR

NameBARKHURST, BOBNameIRONMONGER, PAULAddress5610 HARBOUR CIRCLEAddress2101 SE 8TH TERRACECity-State-Zip:CAPE CORAL FL 33914City-State-Zip:CAPE CORAL FL 33990

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: HEIDI BUNGARD PRESIDENT 08/15/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name LOWMAN, CALEB

Address 5060 MELALUCA DRIVE
City-State-Zip: FORT MYERS FL 33905

Title DIRECTOR

Name DELUCA, EILEEN Address 852 SW 18TH ST.

City-State-Zip: CAPE CORAL FL 33991

Title TREASURER

Name TAYLOR, STACY

Address 123 SE 7TH PLACE

City-State-Zip: CAPE CORAL FL 33990

Title VP

Name PEGG, MOLLY
Address 3503 NE 13TH AVE

City-State-Zip: CAPE CORAL FL 33909

Title VP

Name RAGSDALE, CLAUDIA Address 2143 NW 19TH AVE

City-State-Zip: CAPE CORAL FL 33993

Title DIRECTOR
Name SOMMER, SUE

Address 13222 HEATHER RIDGE LOOP City-State-Zip: FORT MYERS FL 33966

Title DIRECTOR

Name ROSANIO, LILLIAN
Address 4908 SW 9TH PLACE
City-State-Zip: CAPE CORAL FL 33914

Title VP

Name GIBSON, APRIL

Address 2520 SW 11TH PLACE
City-State-Zip: CAPE CORAL FL 33914

Title DIRECTOR
Name ROLAND, TY

Address 17250 HIDDEN ESTATES CIRCLE

City-State-Zip: FORT MYERS FL 33908