

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000005700

Entity Name: ROTSCH FAMILY FOUNDATION, INC.**Current Principal Place of Business:**315 DEVILS BIGHT
NAPLES, FL 34103**Current Mailing Address:**315 DEVILS BIGHT
NAPLES, FL 34103**FEI Number:** 47-1428708**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROTSCH, CHRISTINE A
315 DEVILS BIGHT
NAPLES, FL 34103 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, DIRECTOR
Name	ROTSCH, CHRISTINE
Address	315 DEVILS BIGHT
City-State-Zip:	NAPLES FL 34103

Title	VP, DIRECTOR
Name	PLUMMER, MOLLY
Address	315 DEVILS BIGHT
City-State-Zip:	NAPLES FL 34103

Title	VP, DIRECTOR
Name	ROTSCH, ANDREW
Address	315 DEVILS BIGHT
City-State-Zip:	NAPLES FL 34103

Title	VP, DIRECTOR
Name	ROTSCH, GILLIAN
Address	315 DEVILS BIGHT
City-State-Zip:	NAPLES FL 34103

Title	SECRETARY, TREASURER, DIRECTOR
Name	ROTSCH, JEFFREY
Address	315 DEVILS BIGHT
City-State-Zip:	NAPLES FL 34103

Title	DIRECTOR
Name	PLUMMER, ERIC
Address	315 DEVILS BIGHT
City-State-Zip:	NAPLES FL 34103

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: CHRISTINE ROTSCH**PRESIDENT****03/26/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date