

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600000226

FILED
Feb 19, 2015
Secretary of State
CC6398879877

Entity Name: THE FOUNDATION FOR THE IMMOKALEE CHILD CARE CENTER, INC.

Current Principal Place of Business:

3775 AIRPORT PULLING RDN
UNIT B
NAPLES, FL 34105

Current Mailing Address:

3775 AIRPORT PULLING RDN
UNIT B
NAPLES, FL 34105 US

FEI Number: 31-1467072

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VINING, DONALD
6854 DEL MAR TERRACE
NAPLES, FL 34105 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 DIRECTOR
Name VINING, DONALD Q
Address 6854 DEL MAR TERRACE
City-State-Zip: NAPLES FL 34105

Title TD
Name WHITE, CHARLES L
Address 6021 ASHFORD LANE
City-State-Zip: NAPLES FL 34110-2397

Title PRESIDENT
Name MASSEY, THOMAS A
Address 8445 MYSTIC GREENS #2104
City-State-Zip: NAPLES FL 34113-0626

Title VP
Name HART, JAMES W
Address 3141 DOMINICA WAY
City-State-Zip: NAPLES FL 34119

Title SD
Name NEWELL, DOUGLAS
Address 3370 27TH AVE S.W.
City-State-Zip: NAPLES FL 34117-7140

Title D
Name CARBONE, JERRY L
Address 2340 MONT CLAIRE DRIVE # 202
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name RUTTENBERG, BRAD
Address 1925 CRESTVIEW
176
City-State-Zip: NAPLES FL 34119

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: CHARLES WHITE

TREASURER

02/19/2015

Electronic Signature of Signing Officer/Director Detail

Date