

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90071 009 ****70.00

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01162008 · No Chg-NP CR2E037 (4/06)

4. FEI Number
59-1479653

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RUGANIS, MICHAEL
3161 SANTA BARBARA BLVD
NAPLES, FL 34116

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2-1-08

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	S
NAME	SUE NITE, KAREN
STREET ADDRESS	783 ANDERSON DRIVE
CITY-ST-ZIP	NAPLES, FL 34102
TITLE	D
NAME	STUMBO, JULIE
STREET ADDRESS	5109 INAGUA WAY
CITY-ST-ZIP	NAPLES, FL 34109
TITLE	P
NAME	MILLER, STEVE C
STREET ADDRESS	3161 SANTA BARBARA BLVD
CITY-ST-ZIP	NAPLES, FL 34116
TITLE	D
NAME	EHRGOTT, ERIN
STREET ADDRESS	738 HICKORY ROAD
CITY-ST-ZIP	NAPLES, FL 34108
TITLE	T
NAME	RUGANIS, MICHAEL
STREET ADDRESS	3590 13 AVE SW
CITY-ST-ZIP	NAPLES, FL 34117
TITLE	D
NAME	RAY, VERNON
STREET ADDRESS	2919 GULFSHORE BLVD N
CITY-ST-ZIP	NAPLES, FL 34103

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Karen Sue Nite
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

239-455-1080 2-1-08

Date

Daytime Phone #