

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 26 AM 11:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 727585 (2)

1. Corporation Name

BONITA SPRINGS BOARD OF REALTORS, INC.

Principal Place of Business

Mailing Address

27324 FELTS AVE
BONITA SPRINGS FL 33923

27324 FELTS AVE
BONITA SPRINGS FL 33923

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

10/01/1973

04/28/1994

4. FEI Number

Applied For

59-1708371

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 193.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 27313 OLD 41 ROAD SE

26 27313 OLD 41 ROAD SE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 BONITA SPRINGS FL

28 BONITA SPRINGS, FL

24 Zip 33923

25 Country USA

29 Zip 33923

30 Country USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VOJAK, AMBER, I
4171 BONITA BEACH RD. S.W.
BONITA SPRINGS FL 33923

81 Name

JOHN D. SPEAR

82 Street Address (P.O. Box Number is Not Acceptable)

SUNSHINE PROFESSIONAL PLAZA

83

9200 BONITA BEACH ROAD #204

84 City

BONITA SPRINGS

FL

85 Zip Code

33923

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

John D. Spear

(NOTE: Registered Agent signature required when reinstating)

DATE

4/19/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PAST PRESIDENT
NAME	BRODERSEN, TOM
STREET ADDRESS	27180 RICKVIEW CT
CITY - ST - ZIP	BONITA SPRINGS FL
TITLE	S. PRESIDENT ELECT
NAME	ROACH, DOROTHY
STREET ADDRESS	4501 SPRING CREEK BOX 133
CITY - ST - ZIP	BONITA SPRINGS FL
TITLE	T
NAME	FAULKS, JOHN M
STREET ADDRESS	3940 BONITA BCH RD
CITY - ST - ZIP	BONITA SPRINGS FL
TITLE	D
NAME	MOUNTAIN, DUANE
STREET ADDRESS	27340 OLD 41 RD
CITY - ST - ZIP	BONITA SPRINGS FL
TITLE	D
NAME	GALLIMORE, SANDRA
STREET ADDRESS	9040 BONITA BCH RD
CITY - ST - ZIP	BONITA SPGS FL
TITLE	B. SECRETARY
NAME	EDWARDS, KATHY
STREET ADDRESS	3800 LAKEMONT DR
CITY - ST - ZIP	BONITA SPRINGS FL

1.1 TITLE	TREASURER	☐ Change ☒ Addition
1.2 NAME	MARY LOU WITSKEN	
1.3 STREET ADDRESS	4061 BONITA BEACH ROAD, #109	
1.4 CITY - ST - ZIP	BONITA SPRINGS FL 33923	
2.1 TITLE	PRESIDENT	☐ Change ☒ Addition
2.2 NAME	ANDREW P. DESALVO	
2.3 STREET ADDRESS	28071 VANDERBILT DRIVE	
2.4 CITY - ST - ZIP	BONITA SPRINGS, FL 33923	
3.1 TITLE	DIRECTOR	☐ Change ☒ Addition
3.2 NAME	NAULY DEANGELIS	
3.3 STREET ADDRESS	9040 BONITA BEACH ROAD	
3.4 CITY - ST - ZIP	BONITA SPRINGS, FL 33923	
4.1 TITLE	DIRECTOR	☐ Change ☒ Addition
4.2 NAME	JANET ALLEN	
4.3 STREET ADDRESS	3451 BONITA BAY BLVD #202	
4.4 CITY - ST - ZIP	BONITA SPRINGS, FL 33923	
5.1 TITLE	DIRECTOR	☐ Change ☒ Addition
5.2 NAME	KICKEE DOUGLAS	
5.3 STREET ADDRESS	9040 BONITA BEACH ROAD	
5.4 CITY - ST - ZIP	BONITA SPRINGS, FL 33923	
6.1 TITLE	DIRECTOR	☐ Change ☒ Addition
6.2 NAME	PEGGY ZIADIE	
6.3 STREET ADDRESS	4575 BONITA BEACH ROAD	
6.4 CITY - ST - ZIP	BONITA SPRINGS, FL 33923	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Mary Lou Witsken, Treasurer

4-18-95

992-4848

(SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Date

Daytime Phone