

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 28, 2005 8:00 am
Secretary of State

02-28-2005 90211 046 ****61.25

DOCUMENT # 759675

1. Entity Name

ADVERTISING FEDERATION OF SOUTHWEST FLORIDA, INC.



Principal Place of Business

P O BOX 38
FT MYERS FL 33902

Mailing Address

P O BOX 38
FT MYERS FL 33902

50019405



1st MOORE CR2E037 (10/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1794897

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WEICHERT, GREGORY L
614 NW 11TH TERRACE
CAPE CORAL FL 33993

Name

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

City

FL

Zip Code

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, typed printed name of registered agent and title if applicable.

(NOTE Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	T	<input type="checkbox"/> Delete
NAME	WEICHERT, GREGORY	
STREET ADDRESS	614 NW 11TH TERRACE	
CITY-ST-ZIP	CAPE CORAL FL 33993	
TITLE	D	<input type="checkbox"/> Delete
NAME	RYAN, JOHN	
STREET ADDRESS	1075 CENTRAL AVE.	
CITY-ST-ZIP	NAPLES FL 34102	
TITLE	D	<input type="checkbox"/> Delete
NAME	DINDA, ROSEANNE	
STREET ADDRESS	P.O. BOX. 10	
CITY-ST-ZIP	FT MYERS FL 33901	
TITLE	D	<input type="checkbox"/> Delete
NAME	GREY, DAVID	
STREET ADDRESS	1400 COLONIAL BOULEVARD, STE 204	
CITY-ST-ZIP	FORT MYERS FL 33907	
TITLE	V	<input type="checkbox"/> Delete
NAME	SUSDORF, LEE	
STREET ADDRESS	12364-1 WOODROSE COURT	
CITY-ST-ZIP	FORT MYERS FL 33907	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	VIRDINIA, RICK	
STREET ADDRESS	886 110TH AVE., N, STE. 8	
CITY-ST-ZIP	NAPLES FL 34108	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Pe	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GREEN, MARSHALL	
STREET ADDRESS	7408 COON ROAD	
CITY-ST-ZIP	N. Ft. MYERS, FL 33917	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Gregory Weichert, Vice President 2/28/05 239-945-2525

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #