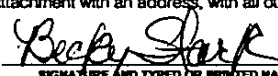


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 30, 2006 8:00 am
Secretary of State

08-30-2006 90001 007 ****70.00

DOCUMENT # 768894 1. Entity Name FOUNDATION FOR THE DEVELOPMENTALLY DISABLED, INC					
Principal Place of Business P.O. BOX 7051 NAPLES, FL 34101-7051 US			Mailing Address P.O. BOX 7051 NAPLES, FL 34101-7051 US		
2. Principal Place of Business P.O. Box 110926 Suite, Apt. #, etc.		3. Mailing Address P.O. Box 110926 Suite, Apt. #, etc.			
City & State Naples, FL		City & State Naples, FL		4. FEI Number 59-2516162	
Zip 34108		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GASVODA, JEAN 1919 E CROWN POINTE BLVD NAPLES, FL 34112				7. Name and Address of New Registered Agent Name Angela M. Lanctot, Esq. Street Address (P.O. Box Number is Not Acceptable) 5515 Bryson Drive, Suite 502 City Naples FL Zip Code 34109	
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 Angela M. Lanctot, Esq.  8/16/06 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by September 6, 2006		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GASVODA, JEAN 1919 E CROWN POINTE BLVD NAPLES, FL 34112	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Stark, Becky 1246 Sweetwater Lane #1603 Naples, FL 34110	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KLEIN, RICHARD K 190 CENTER ST NAPLES, FL 34108	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Lanctot, Angela 814 105th Ave. N. Naples, FL 34108	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LELONEK, ART 10001 TAMiami TRAIL N NAPLES, FL 34108	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lelonek, Art 7024 Pelican Bay #501 Naples, FL 34108	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SNYDER, RICHARD 3131 RIVIERA DR NAPLES, FL 34103	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Neville, Ed 815 Gulf Pavilion Dr. #106 Naples, FL 34108	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCEWEN, CHARLES 191 SOCIETY CT MARCO ISLAND, FL 34145	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Dolfinger, Barbara 815 Gulf Pavilion Dr. #106 Naples, FL 34108	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MARKS, HARVEY 5385 GUADALUPE WAY NAPLES, FL 34119	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Cleaver, Cynthia 260 South Bay #102 Naples, FL 34108	☐ Change ☒ Addition
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: 			Becky Stark, President and Director 8/12/06		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		
Daytime Phone #			239-596-1138		

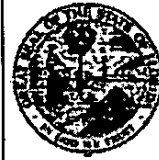
ATTACHMENT
20053894

Additional Directors for 2006 Annual Report

DOCUMENT # 768894

1. Entity Name

FOUNDATION FOR THE DEVELOPMENTALLY
DISABLED, INC



11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D ☐ Change ☒ Addition
NAME	Karp, Arnold
STREET ADDRESS	1919 E. Crown Pointe Blvd.
CITY-ST-ZIP	Naples, FL 34112
TITLE	D ☐ Change ☒ Addition
NAME	Denton, Pat
STREET ADDRESS	7872 Gardner Drive
CITY-ST-ZIP	Naples, FL 34109
TITLE	D ☐ Change ☒ Addition
NAME	Morse, Josephine
STREET ADDRESS	735 Southern Pines Dr.
CITY-ST-ZIP	Naples, FL 34103
TITLE	D ☐ Change ☒ Addition
NAME	Byers, Daniel
STREET ADDRESS	675 96th Ave. N.
CITY-ST-ZIP	Naples, FL 34108