

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006114

FILED  
Mar 09, 2009  
Secretary of State

**Entity Name:** GERMAN AMERICAN BUSINESS COUNCIL OF SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

3838 TAMIAMI TRAIL N.  
SUITE 416  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

3838 TAMIAMI TRAIL N.  
SUITE 416  
NAPLES, FL 34103

**New Mailing Address:**

**FEI Number:** 59-3672236

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

IRC INVESTOR SERVICES, LLC  
3838 TAMIAMI TRAIL N.  
SUITE 416  
NAPLES, FL 34103 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: KLAUS, SCHMIT  
Address: 7998 BEAUMONT CT  
City-St-Zip: NAPLES, FL 34109

Title: P ( ) Delete  
Name: FILTHAUT, RAINER  
Address: 3838 TAMIAMI TRAIL NORTH SUITE 416  
City-St-Zip: NAPLES, FL 34103

Title: D ( ) Delete  
Name: LUDWIG, MONIKA  
Address: 1255 CREEKSIDE PARKWAY  
City-St-Zip: NAPLES, FL 34108 US

Title: VP ( ) Delete  
Name: RHEKER, DIRK  
Address: 2724 12TH STREET NORTH  
City-St-Zip: NAPLES, FL 34103

Title: D ( ) Delete  
Name: NEVIN, HUGH  
Address: 27200 RIVERVIEW CENTER BLVD STE 309  
City-St-Zip: BONITA SPRINGS, FL 34136

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: RAINER N. FILTHAUT

P

03/09/2009

Electronic Signature of Signing Officer or Director

Date