

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 24, 2006 8:00 am**  
**Secretary of State**

04-24-2006 90419 032 \*\*\*\*61.25

DOCUMENT # N03000003974

1. Entity Name

VOICE OF THE FAITHFUL OF SOUTHWEST FLORIDA,  
INC.



Principal Place of Business

3200 TAMiami TRAIL N  
SUITE 200  
NAPLES FL 34103

Mailing Address

POST OFFICE BOX 11114  
NAPLES FL 34101

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BLOUNT, STEVEN V ESQ.  
3200 TAMiami TRAIL N  
SUITE 200  
NAPLES FL 34103

7. Name and Address of New Registered Agent

Name MARGARET CLARK

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

2480 KINGS LAKE BLVD

City NAPLES

FL

Zip Code 34112

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

*Margaret Clark*

Margaret Clark

4-6-06

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, 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

TITLE D ☐ Delete  
NAME CLARK, MARGARET C  
STREET ADDRESS 2480 KINGS LAKE BLVD.  
CITY-ST-ZIP NAPLES FL 34112

TITLE D ☒ Delete  
NAME DALEY, JOSEPH N  
STREET ADDRESS 4401 GULF SHORE BLVD. N #1102  
CITY-ST-ZIP NAPLES FL 34103

TITLE D ☒ Delete  
NAME BLOUNT, J T  
STREET ADDRESS 24431 WOODSAGE DRIVE  
CITY-ST-ZIP BONITA SPRINGS FL 34134

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Treas. Dir ☐ Change ☒ Addition  
NAME John D. Hushon  
STREET ADDRESS 1659 Chinaberry Ct.  
CITY-ST-ZIP Naples FL 34105

TITLE Margaret Clark ☐ Change ☒ Addition  
NAME  
STREET ADDRESS 2480 Kings Lake Blvd  
CITY-ST-ZIP Naples FL 34112

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

*John D. Hushon*

John D. Hushon

4-6-06

239 643 6222