

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000000911

**FILED**  
**Jan 19, 2012**  
**Secretary of State**

**Entity Name:** RE-CREATION TAPPERS OF SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

330 KON TIKI DRIVE  
F2  
NAPLES, FL 34113

**New Principal Place of Business:**

**Current Mailing Address:**

330 KON TIKI DRIVE  
F2  
NAPLES, FL 34113

**New Mailing Address:**

**FEI Number:** 20-0714796

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HORVATH, JEANNE  
330 KON TIKI DRIVE  
F2  
NAPLES, FL 34113 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: DP  
Name: DRUMMOND, JAN  
Address: 333 LAMPLIGHTER DRIVE  
City-St-Zip: MARCO ISLAND, FL 34145

Title: DV  
Name: BARUCK, JUDI  
Address: 1889 LES CHATEAU BLVD.  
City-St-Zip: NAPLES, FL 34109

Title: DV  
Name: BETTS, LINDA  
Address: 1953 CRESTVIEW WAY, #161  
City-St-Zip: NAPLES, FL 34119

Title: DV  
Name: HORVATH, JEANNE  
Address: 330 KON TIKI DRIVE, F-2  
City-St-Zip: NAPLES, FL 34113

I hereby 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 all other like empowered.

SIGNATURE: JEANNE M. HORVATH

TR.

01/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date