

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

**FILED**  
**Apr 20, 2005 8:00 am**  
**Secretary of State**

04-20-2005 90291 048 \*\*\*\*61.25

**DOCUMENT # N04000007151**



1. Entity Name

**REGIONAL BUSINESS ALLIANCE OF SOUTHWEST  
FLORIDA, INC.**

Principal Place of Business

**2600 GOLDEN GATE PKWY  
NAPLES FL 34105-3227**

Mailing Address

**2600 GOLDEN GATE PKWY  
NAPLES FL 34105-3227**

2. Principal Place of Business

**1415 Panther Lane**

Suite, Apt. #, etc.

**240**

3. Mailing Address

**1415 Panther Lane**

Suite, Apt. #, etc.

**240**

City & State

**Naples, FL**

City & State

**Naples, FL**

Zip

**34109**

Country

**Collier**

Zip

**34109**

Country

**Collier**

4. FEI Number

**20-1420782**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

1st MOORE

CR2E037 (10/04)

6. Name and Address of Current Registered Agent

**GOODLETTE, J. DUDLEY  
4001 TAMiami TRAIL NORTH STE 300  
NAPLES FL 34103**

7. Name and Address of New Registered Agent

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

*Richard A. Botthof* **Executive Director**

DATE

**4-5-05**

**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          | <b>Board Member</b>                        | <input type="checkbox"/> Delete |
| NAME           | <b>Art Allen</b>                           |                                 |
| STREET ADDRESS | <b>1333 3rd Av. S.</b>                     |                                 |
| CITY-ST-ZIP    | <b>Naples, FL 34102</b>                    |                                 |
| TITLE          | <b>Executive Director</b>                  | <input type="checkbox"/> Delete |
| NAME           | <b>Richard A. Botthof</b>                  |                                 |
| STREET ADDRESS | <b>1415 Panther Lane, Suite 240</b>        |                                 |
| CITY-ST-ZIP    | <b>Naples, FL 34109</b>                    |                                 |
| TITLE          | <b>Board Member</b>                        | <input type="checkbox"/> Delete |
| NAME           | <b>Richard J. Censits</b>                  |                                 |
| STREET ADDRESS | <b>81 Seagate Drive, #1601</b>             |                                 |
| CITY-ST-ZIP    | <b>Naples, FL 34103</b>                    |                                 |
| TITLE          | <b>Secretary/Treasurer</b>                 | <input type="checkbox"/> Delete |
| NAME           | <b>James R. Lozelle</b>                    |                                 |
| STREET ADDRESS | <b>222 Mermaid's Bight</b>                 |                                 |
| CITY-ST-ZIP    | <b>Naples, FL 34103</b>                    |                                 |
| TITLE          | <b>Board Member</b>                        | <input type="checkbox"/> Delete |
| NAME           | <b>Scott F. Lutgert</b>                    |                                 |
| STREET ADDRESS | <b>4200 Gulfshore Blvd. N.</b>             |                                 |
| CITY-ST-ZIP    | <b>Naples, FL 34103</b>                    |                                 |
| TITLE          | <b>Co-Chair</b>                            | <input type="checkbox"/> Delete |
| NAME           | <b>Paul J. Marinelli</b>                   |                                 |
| STREET ADDRESS | <b>2600 Golden Gate Parkway, Suite 200</b> |                                 |
| CITY-ST-ZIP    | <b>Naples, FL 34105</b>                    |                                 |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

|                |                            |   |
|----------------|----------------------------|---|
| TITLE          | <b>Board Member</b>        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | <b>Thomas S. Monaghan</b>  |   |
| STREET ADDRESS | <b>1025 Commons Circle</b> |   |
| CITY-ST-ZIP    | <b>Naples, FL 34119</b>    |   |
| TITLE          | <b>Chair</b>               | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | <b>Dolph W. vonArx</b>     |   |
| STREET ADDRESS | <b>3663 Rum Road</b>       |   |
| CITY-ST-ZIP    | <b>Naples, FL 34102</b>    |   |
| TITLE          | <b>Board Member</b>        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | <b>Jerry Williams</b>      |   |
| STREET ADDRESS | <b>PO Box 413040</b>       |   |
| CITY-ST-ZIP    | <b>Naples, FL 34101</b>    |   |
| 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          |                            | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           |                            |   |
| STREET ADDRESS |                            |   |
| CITY-ST-ZIP    |                            |   |

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:

*Richard A. Botthof* **Executive Director** **4/5/05**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**239-591-6229**