

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90425 005 ****70.00

DOCUMENT # N04000007342

1. Entity Name
NATIONAL IMPACT FEE ROUNDTABLE, INC.



Principal Place of Business
8420-3 CHARTER CLUB CIRCLE
FT MYERS, FL 33919

Mailing Address
8420-3 CHARTER CLUB CIRCLE
FT MYERS, FL 33919

40089880



2. Principal Place of Business - No P.O. Box #
8420-1 CHARTER CLUB CIRCLE

3. Mailing Address
8420-1 CHARTER CLUB CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04232007 Chg-NP CR2E037 (12/06)

4. FEI Number
34-2007858

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MURPHY, GERALD
8420-3 CHARTER CLUB CIRCLE
FT MYERS, FL 33919

7. Name and Address of New Registered Agent

Name

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

8420-1 CHARTER CLUB CIRCLE

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

Gerald Murphy GERALD MURPHY

4/24/07

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 May 1, 2007

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 ARNOLD, RAHCEL S
STREET ADDRESS 201 N UNION STREET #200
CITY-ST-ZIP ALEXANDRIA, VA 22314

TITLE D ☐ Delete
NAME COLGAN, JOSEPH
STREET ADDRESS 2740 FULTON AVE SUITE 101
CITY-ST-ZIP SACRAMENTO, CA 95821

TITLE D ☐ Delete
NAME FROST, DOUG
STREET ADDRESS 200 W WASHINGTON STREET; 9TH FLOOR
CITY-ST-ZIP PHOENIX, AZ 850031611

TITLE VC ☒ Delete
NAME GABRIEL, CHARLENE
STREET ADDRESS 1010 SECOND AVE SUITE 600
CITY-ST-ZIP SAN DIEGO, CA 92101

TITLE D ☒ Delete
NAME GIARDINA, RICK
STREET ADDRESS 3300 SOUTH PARKER ROAD SUITE 305
CITY-ST-ZIP AURORA, CO 80014

TITLE D ☒ Delete
NAME LEON, PEDRO
STREET ADDRESS 301 S RIDGEWOOD AVE ROOM 2451
CITY-ST-ZIP DAYTONA BEACH, FL 321152451

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE B/D ☐ Change ☒ Addition
NAME BLISE, L. CARSON
STREET ADDRESS 4701 SANGAMORE ROAD SUITE 240
CITY-ST-ZIP BETHESDA, MD 20816

TITLE VC/D ☒ Change ☐ Addition
NAME COLGAN, JOSEPH
STREET ADDRESS 2740 FULTON AVE SUITE 101
CITY-ST-ZIP SACRAMENTO, CA 95821

TITLE P/D ☐ Change ☒ Addition
NAME GALARDI, DEBORAH
STREET ADDRESS 2536 NE 16TH AVE
CITY-ST-ZIP PORTLAND, OR 97212

TITLE S/D ☐ Change ☒ Addition
NAME MULLEN, CLANCY
STREET ADDRESS 1617 W. NINTH STREET
CITY-ST-ZIP AUSTIN, TX 78703

TITLE T/D ☐ Change ☒ Addition
NAME MURPHY, GERALD
STREET ADDRESS 8420-1 CHARTER CLUB CIRCLE
CITY-ST-ZIP FT MYERS, FL 33919

TITLE ~~SMITH, TYSON~~ C/D ☐ Change ☒ Addition
NAME ~~SMITH, TYSON~~
STREET ADDRESS 230 S.W. MAIN ST. SUITE 209
CITY-ST-ZIP LEE'S SUMMIT, MO 64063

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 to this address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gerald Murphy GERALD MURPHY

4/24/07 (239) 765-0202

Date

Daytime Phone #

ATTACHMENT

40089880

#N04000007342

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition D SHREVE, JEANNE 12200 N. PECOS ST. 3RD FLOOR WESTMINSTER, CO 80234
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition D WALLACE, ROBERT P. 1795 S. SEMORAN BLVD., SUITE 1540 WINTER PARK, FL 32792
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

I hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief; that the exemptions contained in Chapter 119, Florida Statutes; I further certify that the information signature shall have the same legal effect as if made under oath; that I am an officer or director as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

DIRECTOR

Date

Daytime Phone #