
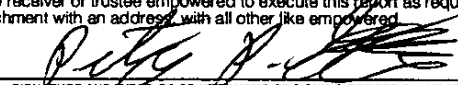


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2007 8:00 am
Secretary of State

04-13-2007 90175 008 ****70.00

DOCUMENT # N05000002049 1. Entity Name AMATEUR RADIO ASSOCIATION OF SOUTHWEST FLORIDA, INC.					
Principal Place of Business 2610 NORTHBROOKE PLAZA DR NAPLES, FL 34119			Mailing Address 4-101-1840 LES CHATEAUX BLVD NAPLES, FL 34109		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address P.O. Box 111604			
Suite, Apt. #, etc. 4701 GOLDEN GATE PK		Suite, Apt. #, etc.			
City & State NAPLES, FL		City & State NAPLES FL		4. FEI Number 237006268	
Zip 34116		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GADDY, PETER 100 27TH STREET NAPLES, FL 34120			7. Name and Address of New Registered Agent Name PETER GADDY Street Address (P.O. Box Number is Not Acceptable) 370 12th AVE NW City NAPLES FL Zip Code 34120		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GADDY, PETER <input type="checkbox"/> Delete 100 27TH STREET NAPLES, FL 34120 34120				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PACINI, CARL <input type="checkbox"/> Delete #4-101 1840 LES CHATEAUX BLVD NAPLES, FL 34109				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD REYNOLDS, G WILLIAM <input type="checkbox"/> Delete 26951 LEPORT STREET BONITA SPRINGS, FL 34135				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WORBOYS, DAVID <input checked="" type="checkbox"/> Delete 27692 HACIENDA DR BONITA SPRINGS, FL 34135				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, RODNEY <input checked="" type="checkbox"/> Delete 3480 45TH AVE NE NAPLES, FL 34120				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALLEN, TIM <input type="checkbox"/> Delete 111 3RD STREET NAPLES, FL 34120				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 370 12th AVE NW NAPLES FL 34120				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GRAF, ROBERT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2085 SEVILLA WAY NAPLES, FL 34109				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MASH, JORDAN <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2033 42nd ST SW NAPLES FL 34116				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
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 with an address with all other like empowered.					
SIGNATURE: X  4-9-07 239-353-1330 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					