

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006718

FILED  
Feb 17, 2006  
Secretary of State

Entity Name: BRITTNI COLAS CHARITY FUND INC.

## Current Principal Place of Business:

11285 LAKELAND CIR  
FORT MYERS, FL 33913

## New Principal Place of Business:

## Current Mailing Address:

11285 LAKELAND CIR  
FORT MYERS, FL 33913 US

## New Mailing Address:

FEI Number: 20-3091918

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

NOTARO, MARCI D  
11285 LAKELAND CIR  
FORT MYERS, FL 33913 US

## Name and Address of New Registered Agent:

WINGENFELD, MARCI D  
11285 LAKELAND CIR  
FORT MYERS, FL 33913 US

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: MARCI D WINGENFELD

02/17/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: NOTARO, MARCI D  
Address: 11285 LAKELAND CIR  
City-St-Zip: FORT MYERS, FL 33913 US

Title: VP ( ) Delete  
Name: RUSH, KARA M  
Address: 4548 VARSITY CIR  
City-St-Zip: LEHIGH ACRES, FL 33971 US

Title: VP (X) Delete  
Name: KING, SHERI  
Address: 6731 WINKLER RD A206  
City-St-Zip: FORT MYERS, FL 33919 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: WINGENFELD, MARCI D  
Address: 11285 LAKELAND CIR  
City-St-Zip: FORT MYERS, FL 33913 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MARCI D WINGENFELD

P

02/17/2006

Electronic Signature of Signing Officer or Director

Date