

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009672

FILED  
Apr 21, 2006  
Secretary of State

**Entity Name:** BRITISH AMERICAN CHAMBER OF SOUTHWEST FLORIDA INC.

**Current Principal Place of Business:**

1415 PANTHER LANE SUITE 121  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

1415 PANTHER LANE SUITE 121  
NAPLES, FL 34109

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

FOWLER WHITE BOGGS BANKER PA  
5811 PELICAN BAY BLVD SUITE 600  
NAPLES, FL 34108 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: DV ( ) Delete  
Name: KROL, JOHN  
Address: 1415 PANTHER LANE SUITE 121  
City-St-Zip: NAPLES, FL 34109

Title: DP ( ) Delete  
Name: RAINFORD, KATHY  
Address: 1415 PANTHER LANE SUITE 121  
City-St-Zip: NAPLES, FL 34109

Title: DT ( ) Delete  
Name: WILLIAMSON, KYLE  
Address: 999 VANDERBILT BEACH RD SUITE 601  
City-St-Zip: NAPLES, FL 34108

Title: DS ( ) Delete  
Name: FARMER, AARON A  
Address: 5811 PELICAN BAY BLVD SUITE 600  
City-St-Zip: NAPLES, FL 34108

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: KATHY RAINFORD

PRES

04/21/2006

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

\_\_\_\_\_  
Date