

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000012066

FILED  
Jun 23, 2010  
Secretary of State

**Entity Name:** THE NAPLES KIWANIS FOUNDATION, INC.

**Current Principal Place of Business:**

% COLLIER ATHLETIC CLUB  
710 GOODLETTE RD, N  
NAPLES, FL 34102

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1453  
NAPLES, FL 34106

**New Mailing Address:**

**FEI Number:** 61-1608387

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OLBRICH, RAINER J  
9848 LUNA CIRCLE C-103  
NAPLES, FL 34109 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: D  
Name: FERNANDEZ, RENATO  
Address: 7901 LEICESTER COURT  
City-St-Zip: NAPLES, FL 34104

Title: D  
Name: MAYBERRY, BRIAN  
Address: 3139 SANTORINI CT  
City-St-Zip: NAPLES, FL 34119

Title: D  
Name: RANKIN, DOUGLAS L  
Address: 2335 TAMiami TRAIL N. STE 308  
City-St-Zip: NAPLES, FL 34103

Title: TREA  
Name: HADLE, ALLISON W  
Address: PO BOX 742  
City-St-Zip: NAPLES, FL 34106

I hereby 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 all other like empowered.

SIGNATURE: ALLISON W. HADLE

TREA

06/23/2010

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

\_\_\_\_\_  
Date