

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22470

FILED
Feb 21, 2006
Secretary of State

Entity Name: IMMOKALEE FRIENDSHIP HOUSE, INC.

Current Principal Place of Business:

602 WEST MAIN ST.
IMMOKALEE, FL 34142

New Principal Place of Business:

Current Mailing Address:

602 WEST MAIN ST.
IMMOKALEE, FL 34142

New Mailing Address:

FEI Number: 65-0025941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAUDISE, EDWARD R.
173 SHARWOOD DR.
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

FISH, MONICA C E.D.
320 NORTH 20TH COURT
IMMOKALEE, FL 34142 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: MONICA FISH

02/21/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: BRAVO, ANDY
Address: P.O. BOX 2507
City-St-Zip: BONITA SPRINGS, FL 34135

Title: S () Delete
Name: MCAVOY, BRIAN
Address: 2045 SERINA WAY
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: PFAFF, DAPHNE
Address: 696 SIXTEENTH AVE SOUTH
City-St-Zip: NAPLES, FL 34102

Title: PD () Delete
Name: ELLIS, DAVID
Address: 4625 DEEP WATER COURT
City-St-Zip: NAPLES, FL 34109

Title: VPD () Delete
Name: WILKINSON, DAVID
Address: 3200 BAILEY LN. STE. 200
City-St-Zip: NAPLES, FL 34119

Title: ED (X) Delete
Name: LAUDISE, ED
Address: 199 WESTWOOD DRIVE
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P. (X) Change () Addition
Name: FACKA, CHRISTOPHER
Address: 850 PARK SHORE DRIVE SUITE 100
City-St-Zip: NAPLES, FL 34103

Title: V.P (X) Change () Addition
Name: SCHROEDER, CHUCK
Address: 496 PALO VERDO DRIVE
City-St-Zip: NAPLES, FL 34119

Title: T. (X) Change () Addition
Name: BRAVO, ANDY
Address: P.O. BOX 2507
City-St-Zip: BONITA SPRINGS, FL 34135

Title: S. (X) Change () Addition
Name: MCAVOY, BRIAN
Address: 5551 RIDGEWOOD DRIVE, SUITE 405
City-St-Zip: NAPLES, FL 34108

Title: E.D. (X) Change () Addition
Name: FISH, MONICA
Address: 320 NORTH 20TH COURT
City-St-Zip: IMMOKALEE, FL 34142

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: MONICA FISH

E.D.

02/21/2006

Electronic Signature of Signing Officer or Director

Date