2005 NOT-FOR-PROFIT CORPORATION

FILED Apr 29, 2005 8:00 am Secretary of State

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DOCUMENT # N23785 1. Entity Name FRIENDS OF ROOKERY BAY, INC.							04-29-2005 90297 012 ****70.00					
Principal Place of Business 300 TOWER RD NAPLES, FL 34113 US		Mailing Address 300 TOWER RD NAPLES, FL 34113 US										
2. Principal Place of Business		3. Mailing Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.				04262005 C	hg-NP	CR2E	037 (10/03)		
City & State			City & State				4. FEI Number 65-009470	03		— ————————————————————————————————————	pplied For at Applicable	
Zip	Country	Zi	ρ	Cou	intry		5. Certificate of S	tatus Desired	M	\$8.75 Add Fee Require		
	6. Name and Address of Current	Register	ed Agent				7. Name and Add	tress of New F	Registered	Agent		
0.44411 5011					Name	_						
SWAIN, RON 4977 BERKELEY DRIVE NAPLES, FL 34112						Street Address (P.O. Box Number is Not Acceptable)						
	<u></u>				City				FI	Zip Cod	9	
	named entity submits this statement folions of registered agent.	r the purp	oose of changing its	registere	ed office o	r register	ed agent, or both, in	the State of Fl	orida. I an	n familiar with,	and accept	
SIGNATURE .	Signature, typed or printed name of registered agent	and title if ap	plicable. (NOTE	: Registere	d Agent signat	ura required	when reinstating)		DATE			
	Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees			ck payable t artment of S			
10.	OFFICERS AND DI	RECTORS		11.	_		ADDITIONS/CHANG	ES TO OFFICE	RS AND C	DIRECTORS IN	10	
TITLE NAME STREET ADDRESS CITY+ST-ZIP	PD GAL, AL 82 NORTH BARFIELD DRIVE MARCO ISLAND, FL 34145	•	⊠ Delete			PD Lo	is M Yoda 177 Berke	er-Su	alin	Change 7 5 FL 3	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SMITH, KRISTEN 568 109TH AVENUE NORTH NAPLES, FL 34105		X Delete			Ro	bent A L 93 Lely 1 a ples, Fi	Berlan Estand	b Dr	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SWAIN, RON 4977 BERKELEY DRIVE NAPLES, FL 34112		☐ Delete					<u> </u>		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HABERKERN, CAROL 6265 28TH AVENUE SW NAPLES, FL 34116		∭ Delete			SD Ron 49 No	a ld E Swa 77 Berkele 2015 FL	1 in 40r 34/12		∑ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LUPO, ASHLEY 950 N. COLLIER BLVD. MARCO ISLAND, FL 34145		Æ Delete	1		D _m	ike Bau 9 Deborn -ples, FL	er Orive	,	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-7IP	D LAYMAN, BRUCE 12040 RIVERVIEW DRIVE BONITA SPRINGS EL 34135		Delete			D N	lick Pens 11 Postal	niman Drive		Change	Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 attachingent with an address, with all other like empowered.

SIGNATURE

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Degrare Phone 8