

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90017 010 ****61.25

DOCUMENT # N93000001673

1. Entity Name

COLLIER FUN FLYERS INC.



Principal Place of Business

751 39TH AVE NE
NAPLES FL 34120
US

Mailing Address

4675 NAVASSA LANE
NAPLES FL 34119
US

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

2009 Serene Meadow Lane

1st MOORE

CR2E037 (10/05)



City & State

City & State

ESTERO FL

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

33928

US

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GATTONE, TONY
4675 NAVASSA LANE
NAPLES FL 34119

7. Name and Address of New Registered Agent

Name Douglas Rickenbach

Street Address (P.O. Box Number is Not Acceptable)

2009 Serene Meadow Lane

City ESTERO

FL

Zip Code

33928

B. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Douglas Rickenbach

(NOTE: Registered Agent signature required when reappointing)

1/31/06

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	BARNES, WALT	
STREET ADDRESS	6928 BURNT SIENNA CIR	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	NEUGENT, WILLIAM	
STREET ADDRESS	707-B 96TH ST N	
CITY-ST-ZIP	NAPLES FL 34108	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	GATTONE, TONY	
STREET ADDRESS	4675 NAVASSA LN	
CITY-ST-ZIP	NAPLES FL 34119	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	MOSKALY, MIKE	
STREET ADDRESS	2595 KENT DR	
CITY-ST-ZIP	NAPLES FL 34112	
TITLE	D	<input type="checkbox"/> Delete
NAME	WAGNER, DONALD	
STREET ADDRESS	2621 WHITE CENTER LN.	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MOSKALY, MIKE	
STREET ADDRESS	3595 KENT DR	
CITY-ST-ZIP	NAPLES FL 34112	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOHN Fraine	
STREET ADDRESS	271 10TH ST NE	
CITY-ST-ZIP	NAPLES, FL 34120	
TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BOB milbert	
STREET ADDRESS	160 16TH ST NE	
CITY-ST-ZIP	NAPLES, FL 34120	
TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RICKY R. SEIGART	
STREET ADDRESS	170 1ST ST SW	
CITY-ST-ZIP	NAPLES, FL 34117	
TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DOUG RICKENBACH	
STREET ADDRESS	2009 Serene Meadow Lane	
CITY-ST-ZIP	ESTERO FL 33928	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TONY GATTONE	
STREET ADDRESS	4675 NAVASSA LN	
CITY-ST-ZIP	NAPLES, FL 34119	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 attachment with an address, with all other like empowered.

SIGNATURE: Doug Rickenbach DOUG RICKENBACH 1/31/2006 239-850-3117