

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 6, 1995.
AMOUNT DUE ON OR BEFORE 8/1/95: \$100 (IF DISSOLVED, AMOUNT DUE TO REINSTATE: SAME)

NONPROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 JUL 10 AM 9:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000003086 (5)

1. Corporation Name

JUNIOR ACHIEVEMENT OF SOUTHWEST FLORIDA, INC.

Principal Place of Business

Mailing Address

1250 TAMAMI TRAIL
SUITE 305 207
NAPLES FL 33940

1250 TAMAMI TRAIL
SUITE 305 207
NAPLES FL 33940

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

06/17/1994

4. FEI Number

65-0503084

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
22 # 207
23 City & State

26 Suite, Apt. #, etc.
27 # 207
28 City & State

24 Zip

Country

29 Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

FILING FEE IS
\$61.25

8. This corporation has liability for intangible tax under s. 199.03?
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILKIN, MARY
1250 TAMAMI TRAIL
SUITE 305
NAPLES FL 33940

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

Chairman D
Jerry F. Nichols
720 Goodlette Road
Naples, FL 33940

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

Vice-Chairman D
Kevin Hale, SunBank/Southwest FL
12730 New Brittany Blvd.
Ft. Myers, FL 33907

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

Treasurer D
Beth Tuttle, Columbia/HCA
2000 Main Street, # 600
Ft. Myers, FL 33901

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

Secretary D
Buddy Bruner, Sprint/UTS
P.O. Box 2477 - N/A
Naples, FL 33939-2477

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

Past Chairman D
John Garbo SWF Cable Advertising
9220 Bonita Beach Rd, #102
Bonita Springs, FL 33923

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

President MD
Mary Wilkin
1250 N. Tamiami Tr., Suite 207
Naples, FL 33940

☐ Change ☒ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

MARY COYLE WILKIN

Date

Daytime Phone #