

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 09, 2007 8:00 am
Secretary of State

05-09-2007 90114 005 ****70.00

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1. Entity Name

WISHING WELL FOUNDATION, INC.



Principal Place of Business

5051 CASTELLO DRIVE
STE 1
NAPLES FL 34103
US

Mailing Address

5051 CASTELLO DRIVE
STE 1
NAPLES FL 34103
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/06)

City & State

City & State

4. FEI Number

65-0525360

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TORBUSH, VICKI
5051 CASTELLO DRIVE
STE 1
NAPLES FL 34103

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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: V ☐ Delete
NAME: GENNARO, JILENE
STREET ADDRESS: 26950 MONTEGO PT #2
CITY-STATE-ZIP: BONITA SPRINGS FL 34134

TITLE: ~~President~~ ☐ Delete
NAME: GOLDSMITH, KERRI
STREET ADDRESS: 6611 GREENBRIGE FARM RD
CITY-STATE-ZIP: FORT MYERS FL 33905

TITLE: S ☐ Delete
NAME: TORBUSH, MIMI
STREET ADDRESS: 243 WINDBROOK CT
CITY-STATE-ZIP: MARCO ISLAND FL 34145

TITLE: D ☒ Delete
NAME: PRICE, MARK
STREET ADDRESS: C/O 850 PARK SHORE DRIVE
CITY-STATE-ZIP: NAPLES FL 34103

TITLE: ~~Treasurer~~ ☐ Delete
NAME: TORBUSH, VICKI
STREET ADDRESS: 26930 WYNDHURST CT
CITY-STATE-ZIP: BONITA SPRINGS FL 34134

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: ☒ Change ☐ Addition
NAME: Kerri Goldsmith
STREET ADDRESS: is President
CITY-STATE-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE: ☒ Change ☐ Addition
NAME: Treasurer
STREET ADDRESS: Vicki Torbush
CITY-STATE-ZIP:

TITLE: ☐ Change ☒ Addition
NAME: D Karen Bossert
STREET ADDRESS: 8819 Banyon Cove Circle
CITY-STATE-ZIP: Ft Myers, FL 33919

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 filers empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

TELEPHONE #

Vicki Torbush
4/22/07 (239) 213-0397