

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Feb 09, 2006
Secretary of State

DOCUMENT# N99000003498

Entity Name: THE ROTARY CLUB OF BONITA SPRINGS-NOON FOUNDATION, INC.**Current Principal Place of Business:**P.O. BOX 1092
BONITA SPRINGS, FL 34133**New Principal Place of Business:****Current Mailing Address:**PO BOX 1989
BONITA SPRINGS, FL 34133**New Mailing Address:****FEI Number:** 59-3607602**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BALLO, DON
11680 BONITA BEACH RD
SUITE 202
BONITA SPRINGS, FL 34135 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JABLONSKI, JOHN
Address: 716 MAINSAIL PL
City-St-Zip: NAPLES, FL 34110

Title: VP () Delete
Name: DAVEY-HADAWAY, BARBARA
Address: 18249 HUCKLBERRY
City-St-Zip: FORT MYERS, FL 33912

Title: S () Delete
Name: PRIOLETTI, MICHAEL
Address: 5811 PELICAN BAY BLVD
City-St-Zip: NAPLES, FL 34105

Title: T () Delete
Name: WIEBEL, DOUGLAS
Address: PO BOX 1092
City-St-Zip: BONITA SPRINGS, FL 34133

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BALLO, DON
Address: 11680 BONITA BEACH RD SUITE 202
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP (X) Change () Addition
Name: BARR, EMEROY
Address: 3561 LAKEMONT DRIVE
City-St-Zip: BONITA SPRINGS, FL 34134

Title: S (X) Change () Addition
Name: ZICCARELLI, DAVID
Address: P.O. BOX 1092
City-St-Zip: BONITA SPRINGS, FL 34133

Title: T (X) Change () Addition
Name: WIEBEL, DOUGLAS
Address: 9420 BONITA BEACH ROAD SUITE 200
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Change (X) Addition
Name: VANCE, AUDREY
Address: 26470 BAY ROAD
City-St-Zip: BONITA SPRINGS, FL 34134

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: DOUGLAS WIEBEL

T

02/09/2006

Electronic Signature of Signing Officer or Director

Date