## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000003750

FILED Jan 17, 2007 Secretary of State

Entity Name: DIRK DESANZO CHARITABLE FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

1749 PERSIMMON COURT 1749 PERSIMMON COURT

NAPLES, FL 34108 NAPLES, FL 34109

**Current Mailing Address: New Mailing Address:** 

3838 TAMIAMI TRAIL NORTH 1749 PERSIMMON COURT

SUITE 300 NAPLES, FL 34109 NAPLES, FL 34103

FEI Number: 59-3587359 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GOODMAN, KENNETH D DESANZO, CHRISTINE M 3838 TAMIAMI TRAIL NORHT 1749 PERŚIMMON CT SUITE 300

NAPLES, FL 34109 NAPLES, FL 34103 US

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: CHRISTINE M DESANZO 01/17/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete DESANZO, DIRK DESANZO, CHRISTINE M Name: Name: 1749 PERSIMMON COURT Address: 1749 PERSIMMON COURT Address:

City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34109

Title: () Delete Title: (X) Change ( ) Addition PEVZNER, MICHAEL Name: DESANZO, FRANK W Name: Address: 2841 EXECUTIVE DRIVE, SUITE 220 Address: 85529 BOSTICK WOOD DR

City-St-Zip: CLEARWATER, FL 33762 City-St-Zip: FERNANDINA BEACH, FL 32034

Title: () Delete Title: (X) Change ( ) Addition CORBETT, GEORGE D Name: DESANZO, TIMOTHY E Name:

801 LAUREL OAK DRIVE, SUITE 405 Address: Address: 842 ELIZA CT

City-St-Zip: City-St-Zip: NAPLES, FL 34108 BRUNSWICK, OH 44212

Title: (X) Delete Title: () Change () Addition Name:

KYLE, VINCENT Name: Address: 3802 WINKLER DRIVE Address: City-St-Zip: **DOVER, OH 33622** City-St-Zip:

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: CHRISTINE M DESANZO Ρ 01/17/2007