

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21652

Entity Name: NAPLES NORTH ROTARY CLUB FOUNDATION, INC.**Current Principal Place of Business:**9225 GULFSHORE DR. N.
NAPLES, FL 34108**Current Mailing Address:**P.O. BOX 1307
NAPLES, FL 34106 US**FEI Number:** 59-2657472**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MOORE, MICHAEL J
582 GORDONIA RD
NAPLES, FL 34108 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:** MICHAEL J. MOORE

03/03/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name SONALIA, JEFF
Address 1130LASTRADA LANE
City-State-Zip: NAPLES FL 34103

Title TREASURER
Name MOORE, MICHAEL J
Address 582 GORDONIA RD
City-State-Zip: NAPLES FL 34108

Title DIRECTOR
Name SHELTON, SHAWN
Address 1096 29TH AVE N.
City-State-Zip: NAPLES FL 34103

Title VP
Name COLIER, BARRON
Address 3838 FT. CHARLES DR.
City-State-Zip: NAPLES FL 34102

Title DIRECTOR
Name MOORE, JIM
Address 117 PLANTATION CIR
City-State-Zip: NAPLES FL 34104

Title PRESIDENT
Name SULLIVAN, FRITZ
Address 2003 E. IMPERIAL DR.
City-State-Zip: NAPLES FL 34110

Title DIRECTOR
Name FOLEY, LOU
Address 1077 29TH AVE N.
City-State-Zip: NAPLES FL 34103

Title DIRECTOR
Name DIGIACOMO, DENNIS
Address 300 5TH AVE S.
City-State-Zip: NAPLES FL 34102

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I hereby 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 all other like empowered.

SIGNATURE: MICHAEL J MOORE

TREASURER

03/03/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR	Title	TREASURER
Name	GARLAND, ALEX	Name	FRANKE, GERD
Address	710 11TH ST. SW	Address	4726 VIA CARMEN
City-State-Zip:	NAPLES FL 34117	City-State-Zip:	NAPLES FL 34105
Title	DIRECTOR	Title	DIRECTOR
Name	STONEBURNER, ROB	Name	SCHMIDGALL, PAUL
Address	10055 BOCA AVE S.	Address	1121 UNICA LN
City-State-Zip:	NAPLES FL 34109	City-State-Zip:	NAPLES FL 34105