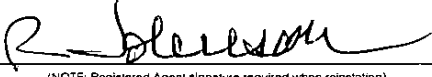
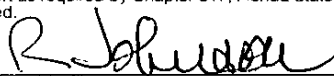


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2008 8:00 am
Secretary of State

02-12-2008 90060 001 ***140.00

DOCUMENT # 744232 1. Entity Name AREA AGENCY ON AGING FOR SOUTHWEST FLORIDA, INC.					
Principal Place of Business 2285 FIRST ST FT MYERS, FL 33901 US			Mailing Address 2285 FIRST ST FT MYERS, FL 33901 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1854441	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KOEHLER, JOHN 2285 FIRST ST FORT MYERS, FL 33901			7. Name and Address of New Registered Agent Name Robert Johnson Street Address (P.O. Box Number is Not Acceptable) 2285 First Street City Fort Myers FL Zip Code 33901		
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 Robert Johnson, President  DATE 1/23/08 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2008		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, ROBERT 14517 AERIES WAY DR FORT MYERS, FL 33912 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DRYBROUGH, ROSEMARY 1730 STARLING DR SARASOTA, FL 34231 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Nowak, Leigh Anna 1304 Odyssey Court Punta Gorda, FL 33983 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KOEHLER, JOHN 2875 PALM BEACH BOULEVARD C-601 FORT MYERS, FL 33916 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HALLENBECK, KAREN 23201 HEMENWAY AVE PUNTA GORDA, FL 33983 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Hallenbeck, Karen 23201 Hemenway Avenue Punta Gorda, FL 33983 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MANNING, NAOMI 3283 ELKCAM BLVD PUNTA GORDA, FL 33983 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 like empowered.					
SIGNATURE: Robert Johnson, President 			1/23/08 239 896-0840		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

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