## **2003 NOT-FOR-PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # 744232



**FILED** Feb 24, 2003 8:00 am § Secretary of State

02-24-2003 91124 001 \*\*\*122.50

	GENCY ON AGING FOR SOUT		1.00	WE IN				
Principal Place of Business 2285 FIRST ST FT MYERS FL 33901 US		Mailing Address 2285 FIRST ST FT MYERS FL 33901 US	. <u> </u>		i 100) ii 2001 and	SI BIRFR (IRAN JIKI) AIRI	1 8(41) 618(s 8(41) B18(s)	GLGVI SIBIG IBBI
2. Principal	I Place of Business	3. Mailing Address						
Suite, Apt. #, etc. City & State		Suite, Apt. #, etc. City & State			☐ CHECK HERE IF MAKING CHANGES			
					4. FEI Number 59-1854441			Applied For
Zip	Country	Zip	Country		5. Certificate of Sta		\$8.75 A	
	6. Name and Address of Current F	legistered Agent					Fee Requi	ired
			Name	יוועדו י	7. Name and Address		stered Agent	
	GINGER		LIKENS, CHRISTOPHER  Street Address (P.O. Box Number is Not Acceptable)			<del></del>		
	20TH COURT CORAL FL 33990	3/186 A04/86		1800	Secondestr	eet #919		-
UAFE U	OUAL FE 23990							
			City	Saras		<del></del> -	FL 3429	
8. The abov	re named entity submits this statement for ations of registered agent.	the purpose of changing its r	egistered office	or registered	d agent, or both, in th	e State of Florida	Lam familiar with	and accent
SIGNATURE	Signature, typed or printed name of registered agent an		Registered Agent sign	nature required w	ikens, Board	l Presider	nt 1/1	.5/03
	FILE NOW: FEE IS \$61.25	9. Election Camp Trust Fund Co		9	55.00 May Be	Make (	Charle Davida	
10			ntribution.		Added to Fees		Check Payable Department of	
10. TITLE	OFFICERS AND DIRE	CTORS	11.	A .		Florida D	epartment of	State
TITLE NAME	P KOCH, GINGER			A   A	Added to Fees	Florida D	epartment of	State
TITLE NAME STREET ADDRESS	P KOCH, GINGER 241 SE 20TH COURT	CTORS	11. 11TLE	D KOCH, 241 S	ODITIONS/CHANGES GINGER EE 20TH COUR	Florida D TO OFFICERS A	Department of	State N 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KOCH, GINGER 241 SE 20TH COURT CAPE CORAL FL 33990	CTORS   Delete	11. TITLE NAME	D KOCH, 241 S CAPE	Added to Fees  DDITIONS/CHANGES  GINGER	Florida D TO OFFICERS A	Department of	State N 10
TITLE NAME STREET ADDRESS	P KOCH, GINGER 241 SE 20TH COURT CAPE CORAL FL 33990 D	CTORS	11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	D KOCH, 241 S CAPE	DDITIONS/CHANGES GINGER BE 20TH COUR CORAL, FL 3	Florida D TO OFFICERS A RT 33990	Department of  ND DIRECTORS II  Change	State N 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P KOCH, GINGER 241 SE 20TH COURT CAPE CORAL FL 33990 D BUMGARNER, ROGER	CTORS   Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	AC D KOCH, 241 S CAPE S LOUDE	DDITIONS/CHANGES GINGER BE 20TH COUR CORAL, FL 3	Florida D TO OFFICERS A RT 33990	Department of  ND DIRECTORS II  Change	State N 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KOCH, GINGER 241 SE 20TH COURT CAPE CORAL FL 33990 D BUMGARNER, ROGER PO-BOX'34266 ARCADIA FL 34266	CTORS   Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	AC D KOCH, 241 S CAPE S LOUDE 8795	DDITIONS/CHANGES GINGER BE 20TH COUR CORAL, FL 3	Florida D TO OFFICERS A RT 33990	Department of  ND DIRECTORS II  Change	State N 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KOCH, GINGER 241 SE 20TH COURT CAPE CORAL FL 33990 D BUMGARNER, ROGER PO-BOX 34266 ARCADIA FL 34266 D	CTORS   Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	AC D KOCH, 241 S CAPE S LOUDE 8795 FORT P	CINGER CORAL, FL 3 CNBACK, DIXI BANYON COVE MYERS, FL 3	Florida D TO OFFICERS A 33990 E CIRCLE 3919	Department of  ND DIRECTORS II  Change	State N 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KOCH, GINGER 241 SE 20TH COURT CAPE CORAL FL 33990 D BUMGARNER, ROGER PO-BOX: 34266 ARCADIA FL 34266 D LIKENS, CHRISTOPHER	CTORS  Delete  Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D KOCH, 241 S CAPE S LOUDE 8795 FORT P LIKEN	CORAL, FL 3 CNBACK, DIXI BANYON COVE MYERS, FL 3	Florida D TO OFFICERS A T 33990 E CIRCLE 3919 HER	Department of  ND DIRECTORS II  Change  Change	N 10 ☐ Addition ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KOCH, GINGER 241 SE 20TH COURT CAPE CORAL FL 33990  D BUMGARNER, ROGER PO-BOX 34266 ARCADIA FL 34266  D LIKENS, CHRISTOPHER 1800 SECOND STREET, SUITE 919 SARASOTA FL 34236  D	CTORS  Delete  Delete	11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	AC D KOCH, 241 S CAPE S LOUDE 8795 FORT P LIKEN 1800 SARAS	CORAL, FL 3 CNBACK, DIXI BANYON COVE MYERS, FL 3 S, CHRISTOP SECOND STRE OTA, FL 342	Florida D TO OFFICERS A RT 33990 E CIRCLE 3919 HER ET, SUITE	Department of  ND DIRECTORS II  Change  Change	N 10 ☐ Addition ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP	P KOCH, GINGER 241 SE 20TH COURT CAPE CORAL FL 33990 D BUMGARNER, ROGER PO-BOX 34266 ARCADIA FL 34266 D LIKENS, CHRISTOPHER 1800 SECOND STREET, SUITE 919 SARASOTA FL 34236 D SCHNAUFER, LAURIE	□ Delete □ Delete	11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D KOCH, 241 S CAPE S LOUDE 8795 FORT P LIKEN 1800 SARAS D MANNI	CORAL, FL 3 CNBACK, DIXI BANYON COVE MYERS, FL 3 CS, CHRISTOP SECOND STRE OTA, FL 342 NG, NAOMI	Florida D TO OFFICERS A TO 3990 E CIRCLE 3919 HER ET, SUITE	Department of  ND DIRECTORS II  Change	N 10  ☐ Addition  ☐ Addition  ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P KOCH, GINGER 241 SE 20TH COURT CAPE CORAL FL 33990  D BUMGARNER, ROGER PO-BOX 34266 ARCADIA FL 34266  D LIKENS, CHRISTOPHER 1800 SECOND STREET, SUITE 919 SARASOTA FL 34236  D	□ Delete □ Delete	11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	D KOCH, 241 S CAPE S LOUDE 8795 FORT P LIKEN 1800 SARAS D MANNI 3283	CINGER CORAL, FL 3 CNBACK, DIXI BANYON COVE MYERS, FL 3 CS, CHRISTOP SECOND STRE OTA, FL 342 NG, NAOMI ELKCAM BOUL	Florida D TO OFFICERS A TO 3990 E CIRCLE 3919 HER ET, SUITE 36	Department of  ND DIRECTORS II  Change	N 10  ☐ Addition  ☐ Addition  ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP VAME VAME VAME VAME VAME VAME VAME VAME	P KOCH, GINGER 241 SE 20TH COURT CAPE CORAL FL 33990  D BUMGARNER, ROGER PO-BOX 34266 ARCADIA FL 34266  D LIKENS, CHRISTOPHER 1800 SECOND STREET, SUITE 919 SARASOTA FL 34236  D SCHNAUFER, LAURIE 895 S INDIANA AVE ENGLEWOOD FL 34223  D	□ Delete □ Delete	11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	D KOCH, 241 S CAPE S LOUDE 8795 FORT P LIKEN 1800 SARAS D MANNI 3283	CORAL, FL 3 CNBACK, DIXI BANYON COVE MYERS, FL 3 CS, CHRISTOP SECOND STRE OTA, FL 342 NG, NAOMI	Florida D TO OFFICERS A TO 3990 E CIRCLE 3919 HER ET, SUITE 36	Department of  ND DIRECTORS II  Change  Change  Change  Change	N 10 Addition  Addition Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP VAME VAME VAME VAME VAME VAME VAME VAME	P KOCH, GINGER 241 SE 20TH COURT CAPE CORAL FL 33990  D BUMGARNER, ROGER PO-BOX 34266 ARCADIA FL 34266  D LIKENS, CHRISTOPHER 1800 SECOND STREET, SUITE 919 SARASOTA FL 34236  D SCHNAUFER, LAURIE 895 S INDIANA AVE ENGLEWOOD FL 34223  D STEPHENS, VERA 3204 C STREET	Delete  Delete  Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D KOCH, 241 S CAPE S LOUDE 8795 FORT P LIKEN 1800 SARAS D MANNI 3283	CINGER CORAL, FL 3 CNBACK, DIXI BANYON COVE MYERS, FL 3 CS, CHRISTOP SECOND STRE OTA, FL 342 NG, NAOMI ELKCAM BOUL	Florida D TO OFFICERS A TO 3990 E CIRCLE 3919 HER ET, SUITE 36	Department of  ND DIRECTORS II  Change  Change  Change  Change	N 10 Addition  Addition Addition
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I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). 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 of Justee 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 life empowered.

SIGNATURE;

CE Christopher Likens, President

1/15/03