

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 18, 2007 8:00 am
Secretary of State

01-18-2007 90113 050 ****70.00

60002975



01102007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3753711	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required -	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SWEENEY, JEANNE
8191 COLLEGE PKWY.
FT. MYERS, FL 33919

**DO NOT WRITE
IN THIS SPACE**

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 *Jeanne M. Sweeney* 1-10-07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MORELAND, DAVID I 7811 UNIVERSITY POINTE DR SUITE 100 FORT MYERS, FL 33907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WILLIAMS, WENDELL 14180 METROPOLIS AVE FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FORSTER, MARK 2104 DEL PRADA BLVD CAPE CORAL, FL 33990
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MOORE, JANET 13515 BELL TOWER DR FORT MYERS, FL 33907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: *Jeanne M. Sweeney* 1-10-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #