

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003721

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: SHADY REST CARE PAVILION, INC.

## Current Principal Place of Business:

2310 NORTH AIRPORT RD.  
FT. MYERS, FL 33907

## New Principal Place of Business:

## Current Mailing Address:

2310 NORTH AIRPORT RD.  
FT. MYERS, FL 33907

## New Mailing Address:

FEI Number: 65-0850574

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EDWARDS, WESTON R  
2310 NORTH AIRPORT RD  
FT. MYERS, FL 33907 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: EDWARDS, WESTON R  
Address: 2310 NORTH AIRPORT ROAD  
City-St-Zip: FORT MYERS, FL 33907

Title: CD ( ) Delete  
Name: MURRAY, ROBERT L  
Address: 6200 WHISKEY CREEK DRIVE  
City-St-Zip: FORT MYERS, FL 33919

Title: VD ( ) Delete  
Name: BLANCHARD, DONALD  
Address: 15460 HUNTINGTON COURT  
City-St-Zip: FORT MYERS, FL 33912

Title: TD ( ) Delete  
Name: STEVENS, MARK  
Address: 6208 WHISKEY CREEK DRIVE  
City-St-Zip: FORT MYERS, FL 33919

Title: SD ( ) Delete  
Name: GELPI, TINA  
Address: FGCU - 10501 FGCU BOULEVARD  
City-St-Zip: FORT MYERS, FL 339656565

Title: D ( ) Delete  
Name: BENNETT, KAREN  
Address: 380 EAST NORTSHORE DRIVE  
City-St-Zip: NORTH FORT MYERS, FL 33917

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: MCCURDY, ROBERT C  
Address: 1613 NORTHEAST SIXTH TERRACE  
City-St-Zip: CAPE CORAL, FL 33909

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: STEVENS, MARK  
Address: 6208 WHISKEY CREEK DRIVE  
City-St-Zip: FORT MYERS, FL 33919

I hereby certify that the information supplied with this filing does not qualify 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: WESTON R. EDWARDS

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date