## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 744232**

FILED Feb 08, 2010 Secretary of State

Entity Name: AREA AGENCY ON AGING FOR SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

2285 FIRST ST 15201 N. CLEVELAND AVE. FT MYERS, FL 33901 US

1100

NO FT MYERS, FL 33903 US

**Current Mailing Address: New Mailing Address:** 

2285 FIRST ST 15201 N CLEVELAND AVE

FT MYERS, FL 33901 US 1100

NO FT MYERS, FL 33903 US

FEI Number: 59-1854441 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JOHNSON, ROBERT MANNING, NAOMI 2285 FIRST ST 15201 N CLEVELAND AVE

FORT MYERS, FL 33901 US 1100 NORTH FORT MYERS, FL 33903 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: NAOMI MANNING 02/08/2010

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

MASON, JOHN Name: Address: 1420 WESTBROOK DR City-St-Zip: SARASOTA, FL 34231

Title:

Name: NOWAK, LEIGH A Address: 1304 ODYSSEY COURT City-St-Zip: PUNTA GORDA, FL 33983

Title:

MARSH, JOAN Name: Address: P.O. BOX 538 City-St-Zip: LABELLE, FL 33975

Title:

Name: MANNING, NAOMI 3283 ELKCAM BLVD Address: City-St-Zip: PUNTA GORDA, FL 33983

Title:

HECKES, HARVEY Name:

15000 BRIDGEWAY LANE #201 Address: City-St-Zip: FORT MYERS, FL 33919

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.

Ρ SIGNATURE: NAOMI MANNING 02/08/2010