

2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 730754

Entity Name: LIGHTHOUSE OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:

35 WEST MARIANA AVENUE
NORTH FORT MYERS, FL 33903

Current Mailing Address:

P.O. BOX 3464
N. FT. MYERS, FL 33918-3464

FEI Number: 59-1665257

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FOWLER, DOUGLAS
12200 COYLE ROAD
FORT MYERS, FL 33905 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PRESIDENT
Name SKINNER, CHRISTY
Address 2708 LAMBAY COURT
City-State-Zip: CAPE CORAL FL 33991

Title EXECUTIVE DIRECTOR
Name FOWLER, DOUGLAS L
Address 12200 COYLE ROAD
City-State-Zip: FORT MYERS FL 33905

Title TREASURER
Name SMITH, MD, STEPHEN E
Address 17700 CALOOSA ROAD
City-State-Zip: ALVA FL 33920

Title DIRECTOR-AT-LARGE
Name ROSEN, OD FA AO, JAY S
Address 9050 PITTSBURGH BLVD
City-State-Zip: FORT MYERS FL 33967

Title DIRECTOR AT LARGE
Name BARINA, JULIO
Address 9091 ESTERO RIVER CIRCLE
City-State-Zip: ESTERO FL 33928

Title VP
Name SYKES, BRIAN
Address 1136 SW 46TH STREET
City-State-Zip: CAPE CORAL FL 33914

Title DIRECTOR AT LARGE
Name SABATKA, GLENN
Address 18013 CYPRESS POINT ROAD
City-State-Zip: FORT MYERS FL 33967

Title SECRETARY
Name TEETER, ESTY
Address 8624 ELEUTHERA COURT
City-State-Zip: FORT MYERS FL 33907

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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.

SIGNATURE: DOUGLAS FOWLER

EXECUTIVE DIRECTOR

10/13/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR AT LARSGE
Name ARREOLA, ROBERTO M.
Address 13521 EAGLE RIDGE DRIVE #126
City-State-Zip: FORT MYERS FL 33912

Title DIRECTOR AT LARGE
Name CONNELL, EVAN
Address 2879 VIA PIAZZA LOOP
City-State-Zip: FORT MYERS FL 33905