

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 735077

**Entity Name:** SOUTHWEST FLORIDA COMMUNITY FOUNDATION, INC.**Current Principal Place of Business:**2031 JACKSON STREET  
SUITE 100  
FORT MYERS, FL 33901**Current Mailing Address:**2031 JACKSON STREET  
SUITE 100  
FORT MYERS, FL 33901 US**FEI Number:** 59-6580974**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**OWEN, SARAH  
2031 JACKSON STREET  
SUITE 100  
FORT MYERS, FL 33901 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, CEO, TRUSTEE  
Name      OWEN, SARAH  
Address    2031 JACKSON STREET  
            SUITE 100  
City-State-Zip: FORT MYERS FL 33901

Title      FINANCE LEAD  
Name      NASSIF, MARINA  
Address    2031 JACKSON STREET  
            SUITE 100  
City-State-Zip: FORT MYERS FL 33901

Title      CHAIRMAN, TRUSTEE  
Name      HAMILTON, DENNIE  
Address    2031 JACKSON STREET  
            SUITE 100  
City-State-Zip: FORT MYERS FL 33901

Title      VC, TRUSTEE  
Name      TIMUR, AYSEGUL  
Address    2031 JACKSON STREET  
            SUITE 100  
City-State-Zip: FORT MYERS FL 33901

Title      TRUSTEE  
Name      REISS, DALE  
Address    2031 JACKSON STREET  
            SUITE 100  
City-State-Zip: FORT MYERS FL 33901

Title      SECRETARY, TREASURER, TRUSTEE  
Name      MARKHAM, GAIL  
Address    2031 JACKSON STREET  
            SUITE 100  
City-State-Zip: FORT MYERS FL 33901

Title      IMMEDIATE PAST CHAIR, TRUSTEE  
Name      ROEPSTORFF, ROBBIE  
Address    2031 JACKSON STREET  
            SUITE 100  
City-State-Zip: FORT MYERS FL 33901

Title      CFO  
Name      PENN, RONALD E.  
Address    2031 JACKSON STREET  
            SUITE 100  
City-State-Zip: FORT MYERS FL 33901

**Continues on page 2**

*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:** SARAH OWEN**PRESIDENT & CEO****04/05/2022**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title CHIEF COLLABORATION OFFICER  
Name MAZANY, TERRY  
Address 2031 JACKSON STREET  
SUITE 100  
City-State-Zip: FORT MYERS FL 33901

Title TRUSTEE  
Name DEMINE, INDERA  
Address 2031 JACKSON STREET  
SUITE 100  
City-State-Zip: FORT MYERS FL 33901

Title TRUSTEE  
Name KNIGHT, HARRISON  
Address 2031 JACKSON STREET  
SUITE 100  
City-State-Zip: FORT MYERS FL 33901

Title TRUSTEE  
Name COUSE, ANDREW  
Address 2031 JACKSON STREET  
SUITE 100  
City-State-Zip: FORT MYERS FL 33901

Title TRUSTEE  
Name BEN-SUSAN, JULIE  
Address 2031 JACKSON STREET  
SUITE 100  
City-State-Zip: FORT MYERS FL 33901