

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008781

Entity Name: SHADY REST FOUNDATION, INC.**Current Principal Place of Business:**2310 NORTH AIRPORT ROAD
FORT MYERS, FL 33907**Current Mailing Address:**2310 NORTH AIRPORT ROAD
FORT MYERS, FL 33907**FEI Number:** 30-0274280**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**EDWARDS, WESTON R
2310 NORTH AIRPORT ROAD
FORT MYERS, FL 33907 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	P
Name	EDWARDS, WESTON R
Address	2310 NORTH AIRPORT ROAD
City-State-Zip:	FORT MYERS FL 33907

Title	CHAIRMAN
Name	MURRAY, ROBERT L
Address	2310 NORTH AIRPORT ROAD
City-State-Zip:	FORT MYERS FL 33907

Title	VC
Name	MCCURDY, ROBERT C
Address	2310 NORTH AIRPORT ROAD
City-State-Zip:	FORT MYERS FL 33907

Title	TREASURER
Name	CARLSON, SHEILA
Address	2310 NORTH AIRPORT ROAD
City-State-Zip:	FORT MYERS FL 33907

Title	DIRECTOR
Name	VANDUIJN, ARIE J.
Address	2310 NORTH AIRPORT ROAD
City-State-Zip:	FORT MYERS FL 33907

Title	DIRECTOR
Name	STECHER, JO
Address	2310 NORTH AIRPORT ROAD
City-State-Zip:	FORT MYERS FL 33907

Title	SECRETARY
Name	WHARTON, SANDRA
Address	2310 NORTH AIRPORT ROAD
City-State-Zip:	FORT MYERS FL 33907

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: WESTON R EDWARDS**PCEO****04/29/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date