

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000006252

**Entity Name:** THE HEIGHTS CENTER, INC.

**Current Principal Place of Business:**

15570 HAGIE DRIVE  
FORT MYERS, FL 33908

**Current Mailing Address:**

15570 HAGIE DRIVE  
FORT MYERS, FL 33908

**FEI Number:** 45-5595206

**Certificate of Status Desired:** No

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

KELLY, KATHRYN  
15570 HAGIE DRIVE  
FORT MYERS, FL 33908 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 CHAIR  
Name INGRAM, CHARLES  
Address 13205 HAMPTON CT  
City-State-Zip: FORT MYERS FL 33913

Title TREASURER  
Name LECLAIR, NEIL  
Address 5820 SUNNYSIDE LANE  
City-State-Zip: FORT MYERS FL 33919

Title VC  
Name GREY, JOHN  
Address 2 GLENVIEW MANOR DR  
City-State-Zip: FORT MYERS BEACH FL 33931

Title SECRETARY  
Name BECKMAN, PAMELA  
Address 17191 KEY VIZCAYA CT  
City-State-Zip: FORT MYERS FL 33908

Title PRESIDENT  
Name KELLY, KATHRYN  
Address 11910 SEABREEZE COVE LANE  
City-State-Zip: FORT MYERS FL 33908

*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:** KATHRYN KELLY

**PRESIDENT / CEO**

**04/21/2015**

Electronic Signature of Signing Officer/Director Detail

Date