

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000000669

**Entity Name:** SOUTHWEST FLORIDA FEDERAL COURT BAR ASSOCIATION  
INC.

**FILED**  
**Jan 04, 2017**  
**Secretary of State**  
**CC4879532224**

**Current Principal Place of Business:**

2110 FIRST STREET  
STE. 2-194  
FT MYERS, FL 33901

**Current Mailing Address:**

2110 FIRST STREET  
STE. 2-194  
FT MYERS, FL 33901 US

**FEI Number: 47-2859051**

**Certificate of Status Desired: No**

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

LEVY-REIS, AMANDA  
2110 FIRST STREET  
STE. 2-194  
FT 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           VP  
Name           HANLON, SHARON  
Address        5633 NAPLES BLVD.  
City-State-Zip: NAPLES FL 34109

Title           P  
Name           LEVY-REIS, AMANDA  
Address        2110 FIRST STREET, STE. 2-194  
City-State-Zip: FT MYERS FL 33901

Title           TREASURER  
Name           MCKEE, TRACI  
Address        P.O. BOX 280  
City-State-Zip: FORT MYERS FL 33901

*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: TRACI MCKEE**

**TREASURER**

**01/04/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date