

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003721

FILED
Mar 21, 2014
Secretary of State
CC0077181697

Entity Name: SHADY REST CARE PAVILION, INC.

Current Principal Place of Business:

2310 NORTH AIRPORT RD.
FT. MYERS, FL 33907

Current Mailing Address:

2310 NORTH AIRPORT RD.
FT. MYERS, FL 33907

FEI Number: 65-0850574

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EDWARDS, WESTON R
2310 NORTH AIRPORT RD
FT. 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 PRESIDENT
Name EDWARDS, WESTON R
Address 2310 NORTH AIRPORT ROAD
City-State-Zip: FORT MYERS FL 33907

Title CHAIRMAN, DIRECTOR
Name MURRAY, ROBERT L
Address 6200 WHISKEY CREEK DRIVE
City-State-Zip: FORT MYERS FL 33919

Title VC, DIRECTOR
Name MCCURDY, ROBERT C
Address 1613 NORTHEAST SIXTH TERRACE
City-State-Zip: CAPE CORAL FL 33909

Title SECRETARY, DIRECTOR
Name CARLSON, SHEILA
Address 7221 KUMQUAT ROAD
City-State-Zip: FORT MYERS FL 33967

Title TREASURER, DIRECTOR
Name MOLZOW, TRICIA
Address 2820 SE 19TH PLACE
City-State-Zip: CAPE CORAL FL 33904

Title DIRECTOR
Name VANDUIJN, ARIE J.
Address 12601 STRATHMORE LOOP
City-State-Zip: FORT MYERS FL 33912

Title DIRECTOR
Name STECHER, JO
Address 633 ASTARIAS CIRCLE
City-State-Zip: FORT MYERS FL 33965

Title DIRECTOR
Name WINCHELL, ALBERT
Address 15320 LAGUNA HILLS DRIVE
City-State-Zip: FORT MYERS FL 33908

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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: WESTON R. EDWARDS

PRESIDENT

03/21/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WHARTON, SANDRA
Address 2310 NORTH AIRPORT RD.
City-State-Zip: FT. MYERS FL 33907