

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710402

FILED
Mar 10, 2007
Secretary of State

Entity Name: CONSERVANCY OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:

1450 MERRIHUE DR
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

1450 MERRIHUE DR
NAPLES, FL 33942 US

New Mailing Address:

FEI Number: 59-1157084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCELWAINE, ANDREW
1450 MERRIHUE DR
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: TYLER, TUCK
Address: 11708 WALTON PL
City-St-Zip: NAPLES, FL 34108

Title: VD () Delete
Name: BRANSILVER, EDWARD
Address: 60 SEAGATE DR #406
City-St-Zip: NAPLES, FL 34103

Title: SD () Delete
Name: MAIZLISH, PHYLLIS
Address: 4601 GULFSHORE BLVD N
City-St-Zip: NAPLES, FL 33940

Title: P () Delete
Name: MCELWAINE, ANDREW
Address: 1450 MERRIHUE DR
City-St-Zip: NAPLES, FL 34102

Title: TD () Delete
Name: WASMER, MARTIN
Address: 600 FIFTH AVE S
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: NICK, PENNIMAN
Address: 611 PORTSIDE DRIVE
City-St-Zip: NAPLES, FL 34103

Title: VD (X) Change () Addition
Name: DOLPH, VON ARX
Address: 3663 RUM ROW
City-St-Zip: NAPLES, FL 34102

Title: SD (X) Change () Addition
Name: WILLIAMS, PAMELA C
Address: 3440 RUM ROW
City-St-Zip: NAPLES, FL 34102

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: THOMAS, GARY
Address: 575 18TH AVE S
City-St-Zip: NAPLES, FL 34102

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ANDREW MCELWAINE

P

03/10/2007

Electronic Signature of Signing Officer or Director

Date