

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711058

FILED  
Apr 23, 2007  
Secretary of State

Entity Name: GOODWILL INDUSTRIES OF SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

4940 BAYLINE DR.  
N. FORT MYERS, FL 33917

**New Principal Place of Business:**

**Current Mailing Address:**

4940 BAYLINE DR.  
N. FORT MYERS, FL 33917

**New Mailing Address:**

FEI Number: 59-6196141      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FEURIG, THOMAS L  
4940 BAYLINE DRIVE  
N FORT MYERS, FL 33917      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: D      ( ) Delete  
Name: ROGERS, HATTON B  
Address: 1772 CORAL WAY  
City-St-Zip: N. FT. MYERS, FL 33917

Title: D      ( ) Delete  
Name: PACK, JUDGE R W  
Address: 1700 MONROE ST 4TH FL  
City-St-Zip: FORT MYERS, FL 33902

Title: P      ( ) Delete  
Name: FEURIG, THOMAS L  
Address: 4940 BAYLINE DRIVE  
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: D      ( ) Delete  
Name: HARTMAN, BARBARA  
Address: 4150 FORD ST. EXT., SUITE 2  
City-St-Zip: FORT MYERS, FL 33916

Title: D      ( ) Delete  
Name: ADAMS, DANIEL  
Address: 2180 W. 1ST STREET, SUITE 212  
City-St-Zip: FORT MYERS, FL 33901

Title: CD      ( ) Delete  
Name: MANN, GEORGE T JR.  
Address: 2940 HANSON STREET  
City-St-Zip: FORT MYERS, FL 33916

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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

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: THOMAS L FEURIG

P

04/23/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date