

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724291

FILED
Apr 15, 2008
Secretary of State

Entity Name: SOUTHWEST FLORIDA SAFETY COUNCIL, INC.

Current Principal Place of Business:

1714 EVANS AVE
FT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

1714 EVANS AVE
FT MYERS, FL 33901

New Mailing Address:

FEI Number: 23-7313332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARNOLD, NOWLIN
14571 GRANDE CAY CIRCLE
UNIT #3202
FT MYERS, FL 33908 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: P/D () Delete
Name: DECKER, DAVID
Address: 1910 SEWARD AVENUE
City-St-Zip: NAPLES, FL 34109 US

Title: V/P () Delete
Name: SIRIANNI, MARGARET
Address: 1394 FLORIDA AVENUE
City-St-Zip: FT. MYERS, FL 33901 US

Title: T/D () Delete
Name: D'ALESSANDRO, PETER
Address: 8341 DANI DRIVE
City-St-Zip: FT. MYERS, FL 33912

Title: S/D () Delete
Name: SHERWOOD, MICHAEL
Address: 12691 EAGLE POINT CIRCLE
City-St-Zip: FT. MYERS, FL 33913

Title: D () Delete
Name: NOWLIN, ARNOLD
Address: 14571 GRANDE CAY CIRCLE UNIT #3202
City-St-Zip: FT. MYERS, FL 33908

Title: D () Delete
Name: ANDERSON, KEVIN
Address: 3435 VIA TORCIDA
City-St-Zip: FT. MYERS, FL 33901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S/D (X) Change () Addition
Name: DECKER, DAVID
Address: 1910 SEWARD AVENUE
City-St-Zip: NAPLES, FL 34109 US

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

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

Title: P/D (X) Change () Addition
Name: SHERWOOD, MICHAEL
Address: 12691 EAGLE POINT CIRCLE
City-St-Zip: FT. MYERS, FL 33913

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 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: DAVID DECKER

S/D

04/15/2008

Electronic Signature of Signing Officer or Director

Date