

**2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jul 20, 2005**  
**Secretary of State**

DOCUMENT# 737816

**Entity Name:** THE DAVID LAWRENCE FOUNDATION FOR MENTAL HEALTH, INC.**Current Principal Place of Business:**6075 GOLDEN GATE PKWY.  
NAPLES, FL 34116**New Principal Place of Business:****Current Mailing Address:**6075 GOLDEN GATE PKWY.  
NAPLES, FL 34116**New Mailing Address:****FEI Number:** 59-1756753**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MAY, CAROL A MS.  
325 SEDGWICK CT  
NAPLES, FL 34108 US**Name and Address of New Registered Agent:**MERRITT, LISA MS.  
787 5TH AVE SOUTH  
NAPLES, FL 34102 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: LISA MERRITT

07/20/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: C/TR ( ) Delete  
Name: MAY, CAROL A MS.  
Address: 325 SEDGWICK CT  
City-St-Zip: NAPLES, FL 34108

Title: V/TR ( ) Delete  
Name: ACKERMAN, JEAN MS.  
Address: 8477 BAY COLONY DR #501  
City-St-Zip: NAPLES, FL 34108

Title: T/TR ( ) Delete  
Name: MERRITT, LISA MS.  
Address: 787 5TH AVE SOUTH  
City-St-Zip: NAPLES, FL 34102

Title: S/TR ( ) Delete  
Name: MUELLER, JOHN MR.  
Address: 9105 CORSEA DEL FONTANA WAY  
City-St-Zip: NAPLES, FL 34109

Title: ED ( ) Delete  
Name: SHAW, CAROL F  
Address: 6075 GOLDEN GATE PKWY  
City-St-Zip: NAPLES, FL 34116

Title: TR ( ) Delete  
Name: WHITCOMB, JAYNIE MS.  
Address: 4875 PELICAN COLONY BLVD.  
City-St-Zip: BONITA SPRINGS, FL 34134

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

Title: C/TR (X) Change ( ) Addition  
Name: MERRITT, LISA MS.  
Address: 787 5TH AVE SOUTH  
City-St-Zip: NAPLES, FL 34102

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

Title: T/TR (X) Change ( ) Addition  
Name: DENNY, CHARLES  
Address: 7179 TORY LANE  
City-St-Zip: NAPLES, FL 34108

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

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

Title: V/TR (X) Change ( ) Addition  
Name: WHITCOMB, JAYNIE MS.  
Address: 4875 PELICAN COLONY BLVD.  
City-St-Zip: BONITA SPRINGS, FL 34134

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CAROL SHAW

ED

07/20/2005

Electronic Signature of Signing Officer or Director

Date