

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90208 042 ****61.25

DOCUMENT # 761503		
1. Entity Name HUMAN RESOURCE MANAGEMENT ASSOCIATION OF SOUTHWEST FLORIDA, INC.		

Principal Place of Business PO BOX 60210 FORT MYERS, FL 33906 US	Mailing Address PO BOX 60210 FORT MYERS, FL 33906 US
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40064031



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

02242006 Chg-NP CR2E037 (11/05)

4. FEI Number 59-1620330	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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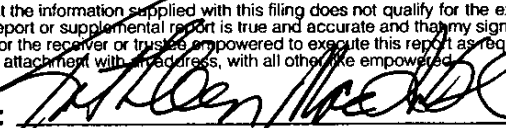
6. Name and Address of Current Registered Agent	
VLASAK-SNELL, MARY 1833 HENDRY ST FORT MYERS, FL 33901	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____	DATE _____

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PE BRYSON, MARTHA 9470 HEALTHPARK CIRCLE FORT MYERS, FL 33908 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Bryson, Martha ☒ Change ☐ Addition 9470 Healthpark Cir. Ft. Myers, FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CARTER, BERNADINE 14750 SW MILE CYPRESS PKWY FORT MYERS, FL 33912 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PE Rhoads, Laura ☐ Change ☒ Addition 4245 Evans Ave Ft. Myers, FL 33901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MACDONALD, SHANNON 1685 MEDICAL LANE FORT MYERS, FL 33907 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Becker, Teresa ☐ Change ☐ Addition 1685 Medical Ln. Ft. Myers, FL 33907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ETHERIDGE, BONNIE PO BOX 60210 FORT MYERS, FL 33906 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PP Etheridge, Bonnie ☒ Change ☐ Addition P.O. Box 60210 Ft. Myers, FL 33906
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MACINTOSH, KATHLEEN 12734 KENWOOD LANE SUITE 4 FORT MYERS, FL 33907 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Springsteen, Marie ☐ Change ☒ Addition 5784 Cape Harbour Dr. Cape Coral, FL 33914
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PP LASHEY, JOANNE 1715 MONROE ST. FORT MYERS, FL 33901 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Rawson, Jane ☐ Change ☒ Addition 24850 Old 41 Rd Bonita Springs, FL 34135

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: 	Date: 4/24/06

239 939-2210

ATTACHMENT

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761503

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11. Additions to Officers and Directors in 10.

VP

CLARK, DINA
8891 TIMBER WILDE DRIVE
BONITA SPRINGS, FL 34135

D

IDING, SANDRA
10501 FGCU BLVD. SOUTH
FORT MYERS, FL 33965

D

MANTICA, JOHN
4350 FOWLER ST., SUITE #15
FORT MYERS, FL 33901

D

PRICHARD, DEBBIE
12800 UNIVERSITY DRIVE, SUITE #335
FORT MYERS, FL 33907