

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763551

FILED  
Jan 06, 2010  
Secretary of State

**Entity Name:** SIX LAKES ALLIANCE, INC.

**Current Principal Place of Business:**

9151 LITTLETON ROAD  
N FORT MYERS, FL 33903

**New Principal Place of Business:**

**Current Mailing Address:**

9151 LITTLETON ROAD  
N FORT MYERS, FL 33903

**New Mailing Address:**

**FEI Number:** 59-2370228

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLUE, CARL  
563 HOGAN DRIVE  
NORTH FORT MYERS, FL 33903 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  
Name: JOHNSON, BARBARA  
Address: 137 NICKLAUS BLVD  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: S  
Name: BABCOCK, LAURA  
Address: 392 CRAMPTON LANE  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: VP  
Name: WEINMANN, JAN  
Address: 476 NICKLAUS BLVD  
City-St-Zip: N. FT. MYERS, FL 33903

Title: T  
Name: BRASSARD, JUDITH  
Address: 87 SNEAD DRIVE  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: D  
Name: MUNNINGS, NORMAN  
Address: 355 NICKLAUS  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: D  
Name: BLUE, CARL  
Address: 563 HOGAN DR  
City-St-Zip: NORTH FORT MYERS, FL 33903

I hereby 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 all other like empowered.

SIGNATURE: CARL BLUE

D

01/06/2010

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

\_\_\_\_\_  
Date