2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2009
Secretary of State

DOCUMENT# N00000002230

Entity Name: WAKE UP AMERICA OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:

2135 CENTRAL AVENUE
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1654
FORT MYERS, FL 33902

New Mailing Address:

FEI Number: 65-0997803 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KOENIG, GERALD F
2135 CENTRAL AVE.
FORT MYERS, FL 33901 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:	SAPP, RICHARD	
Address:	3275 SOUTH ST	
City-St-Zip:	FORT MYERS, FL 33916	
Title:	D	( ) Delete
Name:	QUAKE, TOM	
Address:	19381 PASTEL RD	
City-St-Zip:	THREE RIVERS, MI 49093	
Title:	PD	( ) Delete
Name:	KOENIG, GERALD F	
Address:	7019 NEW POST DRIVE	
City-St-Zip:	N FORT MYERS, FL 33917	
Title:	STD	( ) Delete
Name:	KAYE, ROBERT J	
Address:	2936 VALENCIA WAY	
City-St-Zip:	FORT MYERS, FL 33901	
Title:	VD	( ) Delete
Name:	HESSLER, LINDA	
Address:	1788 FOWLER ST	
City-St-Zip:	FORT MYERS, FL 33901	

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:	

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: GERALD F. KOENIG PRES 01/25/2009

Electronic Signature of Signing Officer or Director — Date