

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004819

FILED  
Feb 08, 2012  
Secretary of State

**Entity Name:** THE EMPOWERMENT ALLIANCE OF SOUTHWEST FLORIDA COMMUNITY DEVELOPMENT CORPORATION

**Current Principal Place of Business:**

750 SOUTH FIFTH STREET  
IMMOKALEE, FL 34142

**New Principal Place of Business:**

**Current Mailing Address:**

750 SOUTH FIFTH STREET  
IMMOKALEE, FL 34142

**New Mailing Address:**

**FEI Number:** 59-3682139

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

COOK, DOROTHY  
750 SOUTH FIFTH STREET  
IMMOKALEE, FL 34142 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:** PRES  
**Name:** OLESKY, EDWARD  
**Address:** 6001 TRAFFORD MARINA  
**City-St-Zip:** IMMOKALEE, FL 33934

**Title:** VP  
**Name:** SMALL, FREDERICK  
**Address:** 1037 MISSISSIPPI AVENUE  
**City-St-Zip:** CLEWISTON, FL 33440

**Title:** S  
**Name:** BARWICK, JEFF  
**Address:** P.O. BOX 643  
**City-St-Zip:** CLEWISTON, FL 33440

**Title:** T  
**Name:** ADAME, MARIA  
**Address:** 210 SOUTH FIRST STREET  
**City-St-Zip:** IMMOKALEE, FL 34142

**Title:** D  
**Name:** JORDAN, MICHAEL  
**Address:** 155 NORTH BRIDGE STREET  
**City-St-Zip:** LABELLE, FL 33935

**Title:** D  
**Name:** HOUCK-TOLL, ERIN  
**Address:** PO BOX 280  
**City-St-Zip:** FORT MYERS, FL 33902

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:** DOROTHY COOK

RA

02/08/2012

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

\_\_\_\_\_  
Date