

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004682

FILED  
Jul 10, 2006  
Secretary of State

Entity Name: SOUTHWEST FLORIDA WATERSHED COUNCIL, INC.

## Current Principal Place of Business:

P.O. BOX 61063  
FORT MYERS, FL 33906

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 61063  
FT MEYERS, FL 33906

## New Mailing Address:

PO BOX 61063  
FT MYERS, FL 33906

FEI Number: 65-1129647      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

BUTLER, GAREY F  
C/O HUMPHREY & KNOTT, P.A.  
1625 HENDRY STREET  
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: ANDRESS, NOEL  
Address: P.O. BOX 420  
City-St-Zip: PINELAND, FL 33945

Title: D ( ) Delete  
Name: BICKFORD, KAREN  
Address: 1165 PALM AVE # 314  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: D ( ) Delete  
Name: FISHER, MATT  
Address: 12800 UNIVERSITY DRIVE, SUITE 400  
City-St-Zip: FORT MYERS, FL 33907

Title: D ( ) Delete  
Name: SAVARESE, MICHAEL  
Address: 3734 RECREATION LANE  
City-St-Zip: NAPLES, FL 34116

Title: D ( ) Delete  
Name: LAURITSEN, JASON  
Address: 368 SANCTUARY ROAD  
City-St-Zip: NAPLES, FL 34120

Title: D ( ) Delete  
Name: BIXLER, MATTHEW  
Address: 2515 FIRST STREET, #24  
City-St-Zip: FORT MYERS, FL 33901

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: RAWL, GREG  
Address: POST OFFICE BOX 1604  
City-St-Zip: FORT MYERS, FL 33902

Title: D (X) Change ( ) Addition  
Name: ARNOLD, SHARON  
Address: 1520 ROYAL PALM SQUARE BLVD., SUITE 160  
City-St-Zip: FORT MYERS, FL 33919

Title: D (X) Change ( ) Addition  
Name: FISHER, MATT  
Address: 12800 UNIVERSITY PARK DRIVE, SUITE 400  
City-St-Zip: FORT MYERS, FL 33907

Title: D (X) Change ( ) Addition  
Name: HECKER, JENNIFER  
Address: 1450 MERRIHUE DRIVE  
City-St-Zip: NAPLES, FL 34103

Title: D (X) Change ( ) Addition  
Name: CASSANI, JOHN  
Address: POST OFFICE BOX 60005  
City-St-Zip: FORT MYERS, FL 33906

Title: D (X) Change ( ) Addition  
Name: PIGOTT, TAMARA  
Address: 12800 UNIVERSITY DRIVE, SUITE 550  
City-St-Zip: FORT MYERS, FL 33907

I hereby certify that the information supplied with this filing does not qualify for the 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: SHARON ARNOLD

D

07/10/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date