2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2007
Secretary of State

DOCUMENT# N01000005465

Entity Name: FRIENDS OF SIX MILE CYPRESS SLOUGH PRESERVE CORPORATION

Current Principal Place of Business:

7730 GLADIOLUS DRIVE
FT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

15761 SONOMA DRIVE #203
FT MYERS, FL 33908

New Mailing Address:

FEI Number: 65-1136073 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANDERS, JOYCE
1457 JEFFERSON 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:	TREBATOSKI, SCOTT	
Address:	15761 SONOMA DRIVE #203	
City-St-Zip:	FORT MYERS, FL 33908	
Title:	D	( ) Delete
Name:	SKEHAN, ALOUISE	
Address:	6323 HOFSTRA CT	
City-St-Zip:	FT MYERS, FL 33919	
Title:	D	( ) Delete
Name:	SANDERS, JOYCE	
Address:	1457 JEFFERSON AVE	
City-St-Zip:	FT MYERS, FL 33901	
Title:	D	( ) Delete
Name:	FIELDS, THERESA	
Address:	14080 DUKE HIGHWAY	
City-St-Zip:	ALVA, FL 33920	
Title:	D	( ) Delete
Name:	KUCHINSKAS, SHARON	
Address:	5311 BENTON STREET	
City-St-Zip:	LEHIGH ACRES, FL 33971	
Title:	D	( ) Delete
Name:	O'CONNER, CHARLES R	
Address:	1360 ALHAMBRA DR	
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:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: SCOTT TREBATOSKI D 01/06/2007

Electronic Signature of Signing Officer or Director — Date