2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005465

FILED Mar 27, 2009 Secretary of State

Entity Name: FRIENDS OF SIX MILE CYPRESS SLOUGH PRESERVE CORPORATION

Current Principal Place of Business: New Principal Place of Business: 7791 PENZANCE BLVD. FT MYERS, FL 33966 **Current Mailing Address: New Mailing Address:** 7791 PENZANCE BLVD. FT MYERS, FL 33966 FEI Number: 65-1136073 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SANDERS, JOYCE 1457 JEFFERSON AVE. FORT MYERS, FL 33901 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition SANDERS, JOYCE BABB, CAROLYN Name: Name: 1457 JEFFERSON AVE. Address: 10088 PACIFIC PINES AVE. Address: City-St-Zip: FORT MYERS, FL 33901 US City-St-Zip: FORT MYERS, FL 33966 US Title: Title: (X) Change () Addition () Delete BABB, CAROLYN Name: O'CONNOR, CHARLES Name: Address: 10088 PACIFIC PINES AVE. Address: 1360 ALHAMBRA DRIVE City-St-Zip: FORT MYERS, FL 33966 US City-St-Zip: FORT MYERS, FL 33901 US Title: () Delete Title: () Change () Addition JOHNSON, NANCY Name: Name: 14030 EAGLE RIDGE ROAD Address: Address: City-St-Zip: FORT MYERS, FL 33912 US City-St-Zip: Title: () Delete Title: () Change () Addition MURRAY, FRANK Name: Name: 2134 SW 15TH TERRACE Address: Address: City-St-Zip: CAPE CORAL, FL 33990 US City-St-Zip: Title: () Delete Title: () Change () Addition MURRAY, MARY Name: Name: 2134 SE 15TH TERRACE Address: Address: City-St-Zip: CAPE CORAL, FL 33990 US City-St-Zip: Title: () Delete Title: (X) Change () Addition GNAGEY, JOHN BLACK, CHERYL Name: Name: Address: 9341 MARKETPLACE ROAD Address: 8781 LATEEN LANE #102 FORT MYERS, FL 33912 US FORT MYERS, FL 33919 US City-St-Zip: 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: FRANK J. MURRAY T 03/27/2009