## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000008439

Entity Name: ESTERO COMMUNITY PLANNING PANEL, INC.

FILED Apr 07, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 20225 WILDCAT RUN DR ESTERO, FL 33928 **Current Mailing Address: New Mailing Address:** PO BOX 955 ESTERO, FL 339280955 FEI Number: 65-1143023 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MOBLEY, RALPH M 9781 SAŚSAFRAS CT ESTERO, FL 33928 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: () Change () Addition () Delete ESLICK, DONALD Name: Name: 23650 VIA VENETO #604 Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition Name: TOTH, GREGORY Name: TOTH, GREGORY Address: 1700 MEDICAL LANE Address: 12651 MCGREGOR BLVD, STE 4-403 City-St-Zip: FT MYERS, FL 33907 City-St-Zip: FT MYERS, FL 33919 Title: () Delete Title: () Change () Addition NOETHLICH, NEAL Name: Name: 20225 WILDCAT RUN DRIVE Address: Address: City-St-Zip: ESTRO, FL 33928 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition Name: Name: LAFERTE, AL 4174 TEQUESTA DRIVE Address: Address: City-St-Zip: City-St-Zip: ESTERO, FL 33928 Title: () Delete Title: ( ) Change (X) Addition ORTEGA, JOE Name: Name: 207-32 CHARING CROSS CIRCLE Address: Address: City-St-Zip: City-St-Zip: ESTERO, FL 33928 Title: () Delete Title: ( ) Change (X) Addition HUTCHCRAFT, MITCH Name: Name: Address: Address: 9990 COCONUT RD. BONITA SPRINGS, FL 34135 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NEAL E. NOETHLICH CD 04/07/2004