

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000001129

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** THE EXECUTIVE NETWORK OF CHARLOTTE COUNTY, INC.

**Current Principal Place of Business:**

4014-C TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33952

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 495182  
PORT CHARLOTTE, FL 339495182

**New Mailing Address:**

**FEI Number:** 65-1152262

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KECKEN, JEROME F  
4014-C TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33952 US

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

VOSS, JAMES  
20020 VETERANS BLVD.#10  
PORT CHARLOTTE, FL 33954 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: JAMES VOSS

04/29/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: DETTOR, KAREN  
Address: 23023 WESTCHESTER BLVD  
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: VP  
Name: WAGNER, CHRIS  
Address: 3280 TAMIAMI TRAIL SUITE 56A  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: T  
Name: VOSS, JAMES  
Address: 20020 VETERANS BLVD. #10  
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: S  
Name: GRILO, PHYLLIS  
Address: PO BOX 495182  
City-St-Zip: PORT CHARLOTTE, FL 33952

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: JAMES VOSS

T

04/29/2010

Electronic Signature of Signing Officer or Director

Date