

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005879

FILED
Jan 04, 2005
Secretary of State

Entity Name: SOUTHWEST FLORIDA LIFE QUALITY DEVELOPMENT CORPORATION

Current Principal Place of Business:

6410-B ARC WAY
FT. MYERS, FL 33901

New Principal Place of Business:

6410-B ARC WAY
FT. MYERS, FL 33912

Current Mailing Address:

6410-B ARC WAY
FT. MYERS, FL 33901

New Mailing Address:

6410-B ARC WAY
FT. MYERS, FL 33912

FEI Number: 04-3610527

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STEVENS, CORIE
6410 B ARC WAY
FT. MYERS, FL 33901 US

Name and Address of New Registered Agent:

GLATZ, CONNIE
6410 B ARC WAY
FT. MYERS, FL 33912 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: CONNIE GLATZ

01/04/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: STEVENS, CORIE
Address: 350 PARKDALE BLVD
City-St-Zip: LEHIGH, FL 33936

Title: D () Delete
Name: WILSON, KELLY
Address: 6410 B-ARC WAY
City-St-Zip: FORT MYERS, FL 33990

Title: DV () Delete
Name: GIBBS, MIKE
Address: 6410-B ARC WAY
City-St-Zip: FORT MYERS, FL 33901

Title: D () Delete
Name: AMBURGY, BARBARA
Address: 64-10 ARC WAY
City-St-Zip: FORT MYERS, FL 33901

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: GALLAGHER, LAURA
Address: 6410-B ARC WAY
City-St-Zip: FT MYERS, FL 33912

Title: DP (X) Change () Addition
Name: JONES, SHERYL
Address: 6410 B-ARC WAY
City-St-Zip: FORT MYERS, FL 33912

Title: DV (X) Change () Addition
Name: BENTON, YVETTEE
Address: 6410-B ARC WAY
City-St-Zip: FORT MYERS, FL 33912

Title: DS (X) Change () Addition
Name: SPARKS, TRACY
Address: 64-10 ARC WAY
City-St-Zip: FORT MYERS, FL 33912

Title: D () Change (X) Addition
Name: JOINER, KIM
Address: 6410 -B ARC WAY
City-St-Zip: FT MYERS, FL 33912

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: LAURA GALLAGHER

DT

01/04/2005

Electronic Signature of Signing Officer or Director

Date