


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 31, 2007 08:00 AM
Secretary of State

DOCUMENT # N02181	
1. Entity Name ENVIRONMENTAL CONFEDERATION OF SOUTHWEST FLORIDA, INC.	

Principal Place of Business C/O BECKY AYECH 421 VERNA ROAD SARASOTA, FL 34240	Mailing Address C/O LINDA WILSON 6205 MARCUM ST ENGLEWOOD, FL 34224-9634
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01242007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2597426	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent AYECH, BECKY 421 VERNA RD SARASOTA, FL 34240

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8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

U00000613952
02/06/07-80005-018 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD AYECH, BECKY 421 VERNA ROAD SARASOTA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PETERSON, ELLEN BOX 345 ESTERO, FL 33928
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WILSON, LINDA J 6205 MARCUM ST ENGLEWOOD, FL 342249364
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HIGHSMITH, DEBBIE 24213 PIRATE HARBOR BLVD PUNTA GORDA, FL 33955
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Linda J. Wilson Linda J. Wilson 1-27-07 944-475-7210
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #