

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N03000000149

1. Entity Name

SOUTHWEST FLORIDA BEHAVIORAL HEALTH, INC.



Principal Place of Business

6075 GOLDEN GATE PKWY
NAPLES FL 34116

Mailing Address

6075 GOLDEN GATE PKWY
NAPLES FL 34116

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

16-1647116

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fees Required

6. Name and Address of Current Registered Agent

SCHIMMEL, DAVID
6075 GOLDEN GATE PKWY
NAPLES FL 34116

pd 1/27/04
#1003
\$61.25

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME ROSS, JERRY
STREET ADDRESS 1700 EDUCATION AVE
CITY-ST-ZIP PUNTA GORDA FL 33950

TITLE D ☐ Delete
NAME EUSTIS, JAN
STREET ADDRESS 2789 ORTIZ AVE
CITY-ST-ZIP FT MYERS FL 33905

TITLE D ☐ Delete
NAME LEWIS, KEVIN
STREET ADDRESS 2101 MCGREGOR BLVD
CITY-ST-ZIP FT MYERS FL 33901

TITLE D ☐ Delete
NAME HOSICK, JOE
STREET ADDRESS 601 W ALVERDEZ AVE
CITY-ST-ZIP CLEWISTON FL 33440

TITLE D ☐ Delete
NAME SCHIMMEL, DAVID
STREET ADDRESS 6075 GOLDEN GATE PKWY
CITY-ST-ZIP NAPLES FL 34116

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10:

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

David Schimmel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/04
Date

2393541424
Daytime Phone #

FILED

04 OCT 26 AM 11:54

02/10/04 9:00:19 AM 6125
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MOORE CR2E037 (11/03)

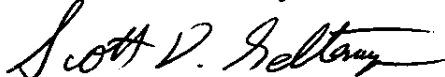
October 20, 2004

Florida Dept of State
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

Re: Document Number N03000000149
Southwest Florida Behavioral Health, Inc.
6075 Golden Gate Parkway
Naples, FL 34116

To Whom It May Concern:

This letter and attachments are to follow up my phone conversation with your office earlier today. It is in response to having received the attached Notice of Dissolution or Revocation. We would like for you to reinstate this corporation. Apparently you did not receive the letter and Annual report (attached) that were sent on March 1, 2004, as requested by your February 12, 2004 letter (attached). I hope this is sufficient documentation for you to reinstate this corporation. Please call me with any questions at 239-354-1420. Thank you.



Scott D. Geltemeyer
Chief Financial Officer
Southwest Florida Behavioral Health, Inc.