

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

DOCUMENT# N03000006862

**FILED**  
**Apr 09, 2010**  
**Secretary of State**

**Entity Name:** SAN CARLOS PARK CIVIC ASSOCIATION, INC.

**Current Principal Place of Business:**

KARL J DREWS COMMUNITY CENTER  
LEE ROAD SAN CARLOS PARK  
FORT MYERS, FL 33967 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 510  
ESTERO, FL 33929 US

**New Mailing Address:**

**FEI Number:** 59-1982628

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ANDERSEN, DEBORAH  
18690 SARASOTA ROAD  
FT MYERS, FL 33967 US

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

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:**

**Title:** P  
**Name:** FEDIGAN, MARK  
**Address:** 18690 SARASOTA RD  
**City-St-Zip:** FT MYERS, FL 33967 US

**Title:** VP  
**Name:** CERRA, GENE  
**Address:** 8333 BAMBOO RD  
**City-St-Zip:** FT MYERS, FL 33967 US

**Title:** SEC  
**Name:** MARTIN, RHONDA  
**Address:** 7237 MYRTLE ROAD  
**City-St-Zip:** FT MYERS, FL 33967 US

**Title:** T  
**Name:** ANDERSEN, DEBORAH  
**Address:** 18690 SARASOTA ROAD  
**City-St-Zip:** FT MYERS, FL 33967 US

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:** DEBORAH ANDERSEN

T

04/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date