

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000309

FILED  
Jan 19, 2010  
Secretary of State

**Entity Name:** SOUTHWEST FLORIDA MEDICAL RESERVE CORPS FOUNDATION, INC.

**Current Principal Place of Business:**

1332 SAND CASTLE ROAD  
SANIBEL, FL 33957 US

**New Principal Place of Business:**

**Current Mailing Address:**

1332 SAND CASTLE ROAD  
SANIBEL, FL 33957 US

**New Mailing Address:**

**FEI Number:** 52-2449874

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAMILTON, LESLIE C ESQ  
1332 SAND CASTLE ROAD  
SANIBEL, FL 33957 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: DIR  
Name: SANTUCCI, PATRICIA M.D.  
Address: 2252 STARFISH LANE  
City-St-Zip: SANIBEL, FL 33957 US

Title: DIR  
Name: BROWN, DONALD M.D.  
Address: 16351 KELLY WOODS DRIVE  
City-St-Zip: FT. MYERS, FL 33908 US

Title: DIR  
Name: MANOLIS, DEANE .MD  
Address: 790 BEACH DRIVE  
City-St-Zip: SANIBEL, FL 33957 US

Title: DIR  
Name: HAMILTON, REGINA M  
Address: 1332 SAND CASTLE ROAD  
City-St-Zip: SANIBEL, FL 33957 US

Title: DIR  
Name: SANTUCCI, RAYMOND M.D.  
Address: 2252 STARFISH LANE  
City-St-Zip: SANIBEL, FL 33957 US

Title: DIR/  
Name: HAMILTON, LESLIE C ESQ  
Address: 1332 SAND CASTLE ROAD  
City-St-Zip: SANIBEL, FL 33957 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: LESLIE C. HAMILTON

PRES

01/19/2010

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

\_\_\_\_\_  
Date