2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

wth.

SIGNATURE

Apr 02, 2008 8:00 am Secretary of State **DOCUMENT # N05000005227** 04-02-2008 90033 050 ****70.00 1. Entity Name SOUTHWEST FLORIDA CHAPTER OF THE AMERICAN SOCIETY FOR TRAINING AND DEVELOPMENT, INC. Principal Place of Business Mailing Address PO BOX 07223 149 CRESENT DR 40057351 FT. MYERS, FL 33919 PUNTA GORDA, FL 33950 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 560 Er ASTO ASTO SWAL Suite, Apt. #, etc. Suite, Apt. #, etc. 03292008 Chg-NP CR2E037 (12/06) 5685 BALK AN COURT 50 X 03 Applied For 4. FEI Number 06-1769041 City & State City & State LOON mules FL Not Applicable DAT MYES Country \$8.75 Additional Country Zip 5. Certificate of Status Desired 2906 3919 USA Fee Required <u>USA</u> 8. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MICHAGI FISCHER PUGH, JODY Street Address (P.O. Box Number is Not Acceptable) 20649 TORRE DELLAGO ST 4212 ESTERO, FL 33928 Zip Code 3-3-7) / City ARR CODAL 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 famillar with, and accept the obligations of registered agent. JOHN M. FISCHER TR TORASURE SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Due by May 1, 2008 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITI F D Delete TITLE D ☐ Change Addition RULAND, SUE MALE NAME SUTTOR 3434 N. HANKOKK BOIDGE PARKWAY STREET ADDRESS 3200 BAILEY LANE STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34105 CITY-ST-ZIP N. FORT MYERS 33903 TITLE ☐ Detete TITLE Change Addition JONES, DARALENE NAME NAME STREET ADDRESS 1047 AVERLY ST STREET ADDRESS FT MYERS, FL 33919 CITY-ST-7IP CITY-ST-ZIP TITE ☐ Delete TITLE Change ☐ Addition PUGH, JODY D NAME NAME STREET ADDRESS 20649 TORRE DELLAGO ST STREET ADDRESS ESTERO FL 33928 CTTY-ST-7P CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition JONES, CHRISTOPHER NAME NAME STREET ADDRESS 12751 WESTLINKS DR STREET ADDRESS FORT MYERS, FL 33913 CITY-ST-ZIP CITY-ST-ZIF TITLE Delete TITLE ☐ Change **Addition** GER1 PANKOW, LAURIE NAME NAME 20301GRANDE OAK SHOPPING BLVD STREET ADDRESS STREET ADORESS 2350 WES CITY-ST-ZIP FT. MYERS, FL 33928 CITY-ST-ZIP 90 TITLE ☐ Detete TITLE ☐ Addition G-Change JAFFE, DAVID NAME NAME STREET ADDRESS 5685 BALKAN CT STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP FT MYERS, FL 33906 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.

JOHN MICHAEL FISCHER JE

E OF SIGNONG OFFICER OR DIRECTOR

FILED

236-358-3500

3/30/08

2008 NOT-FOR-PROFIT CORPORATION TACHMENT ADDENDOM

	MENT # N05000005	P	3 OFZ				
1. Entity Name SOUTHWEST FLORIDA CHAPTER OF THE AMERICAN				DIRE	C700 CH	ANDES CINC	
SOCIETY FOR TRAINING AND DEVELOPMENT, INC.						+DDITION	
Principal Plac	ce of Business				DIRECTO		
149 CRESEN				S (NO C	F1 = 3		
PUNTA GORDA, FL 33950 FT. MYERS, FL 33910					~	- 1	
2 Principal F	Place of Business - No P.O. Box #		- 40	D5735)		
z. micipan	race of business 4 No 1.0. Box #				•		
Suite, Apt.	#, etc.		03302008	Chg-NP CR2E0	37 (12/06)		
City & State City & State				4. FEI Number	144	Applied For	
Zip	ip Country Zip		Country		06-1769041 Not Applicable 5. Certificate of Status Desired \$8.75 Additional		
			· · · · · · · · · · · · · · · · · · ·		_	Fee Required	
				7. Name and Address of New Registered Agent			
PUGH, JC 20649 TO	DDY RRE DELLAGO ST	Street Address (P.O. Box Number is Not Acceptable)					
ESTERO, FL 33928							
			CHY FL Zip Code				
						<u>- L</u>	
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 agnature required when renistering) DATE							
Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to							
	Due by May 1, 2008	Trust Fund Co	ntribution.	Added to Fees	Fiorida Depa	rtment of State	
10.	OFFICERS AND DIRE	ECTORS Delete	. 11. TITLE	ADDITIONS/CHAN	GES TO OFFICERS AND D	RECTORS IN 10	
NAME	RULAND, SUE	L built	NAME	JOHN MICHI	AEL FIGHT		
STREET ADDRESS CITY-ST-ZIP	3200 BAILEY LANE NAPLES, FL 34105		STREET ADORESS CITY-ST-ZIP	4212 SW	10+N AVE	33914	
TITLE	s	Delete	TITLE	D	AC AC	☐ Change	
NAME STREET ADDRESS	JONES, DARALENE 1047 AVERLY 6T		NAME Street address	NE YMAN	WAL BOD	LEJARA	
CITY-ST-ZIP	FT MYERS, FL 38919		CITY-ST-ZIP	FORT MUE	03 FL 37	3966	
TITLE NAME	P PUGH, JODY D	☐ Defete	TITLE	er wit. a	< 00 L	Change Addition	
STREET ADDRESS	20649 TORRE DELLAGO ST		STREET ADDRESS	4200 TE	QUESTA	DRIVE	
CITY-ST-ZIP	ESTERO, FL 33928		CITY-ST-ZIP	ESTEDO	FLORIDA	33928	
TITLE NAME	D JONES, CHRISTOPHER	☐ Delete	TITLE NAME	DLORNA	FLORIDA FLORIDA KIBBEY TSHORE DA	Change Maddition	
STREET ADDRESS CITY+ST-ZIP	12751 WESTLINKS OR FORT MYERS, FL 33913		STREET ADDRESS	(0308 EAG	TSHURE DA	-10 = 32,	
TITLE	VP / 33913	☐ Delete	TITLE	FORT MYG	as FL 3	Change Addition	
NAME STREET ADDRESS	PANKOW, LAURIE		NAME				
STREET ADDRESS CITY-ST-ZIP	20301GRANDE OAK SHOPPING FT. MYERS, FL 33928	BLVD	STREET ADORESS CITY+ST-ZIP				
TITLE	Т	☐ Delete	TITLE			☐ Change ☐ Addition	
NAME STREET ADDRESS	JAFPE, DAVID 5685 BALKAN CT		NAME Street address			•	
CITY-ST-ZIP	FT MYERS, FL 33906		CITY-ST-ZIP				
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: SIGNATURE AND TYPED OR PRINTED MANE OF SIGNATU							
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