2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000009514

FILED Oct 18, 2012 Secretary of State

Entity Name: ESTERO COMMUNITY IMPROVEMENT FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

23650 VIA VENETO C/O DON ESLICK

UNIT 604 1001 ARBOR LAKE DRIVE, UNIT 202

BONITA SPRINGS, FL 34134 NAPLES, FL 34110

New Mailing Address: **Current Mailing Address:**

23650 VIA VENETO C/O DON ESLICK

1001 ARBOR LAKE DRIVE, UNIT 202 **UNIT 604** BONITA SPRINGS, FL 34134

NAPLES, FL 34110

FEI Number: 20-3957298 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ESLICK, DONALD F LIENESCH, ROBERT P 23650 VIA VENETO 9042 FALLING LEAF DR BONITA SPRINGS, FL 34135 **UNIT 604** US

BONITA SPRINGS, FL 34134 US

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: ROBERT P. LIENESCH 10/18/2012

> Date Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ESLICK, DONALD F Name:

Address: 1001 ARBOR LAKE DRIVE, UNIT 202

City-St-Zip: NAPLES, FL 34110 US

Title: DIR

Name: MACNELLIS, BEVERLY Address: 22819 FOREST RIDGE DRIVE City-St-Zip: ESTERO, FL 33928 US

Title: DIR

EDWARDS, MARILYN Name:

Address: 9240 SPRING RUN BOULEVARD City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: DIR

Name: SMITH, CHRIS

19649 VINTAGE TRACE CIR. Address: City-St-Zip: FT. MYERS, FL 33912 US

Title: DIR

COHEN, HOWARD Name: 4730 VIA NAPOLI Address:

BONITA SPRINGS, FL 34134 US City-St-Zip:

Title:

LIENESCH, ROBERT P Name: Address: 9042 FALLING LEAF DR BONITA SPRINGS, FL 34135 City-St-Zip:

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: ROBERT PLIENESCH DIR 10/18/2012