2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008809

FILED Feb 08, 2009 Secretary of State

Entity Name: GREATER ESTERO CULTURAL ARTS COUNCIL, INC

Current Principal Place of Business: New Principal Place of Business: 10706 RED CARDINAL CIR 10141 ORCHID RIDGE LANE BONITA SPRINGS, FL 34135 ESTERO, FL 33928 **Current Mailing Address: New Mailing Address: POB 103** ESTERO, FL 33928 FEI Number: 20-5267415 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: CARR, WILLIAM E QUEEN, GARY W 10141 ÓRCHID RIDGE LAND 1076 RED CARDINAL CIR BONITA SPRINGS, FL 34135 ESTERO, FL 33928 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: GARY W. QUEEN 02/08/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Delete () Change () Addition CARR, WILLIAM E Name: Name: 10706 RED CARDINAL CIR Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: Title: Title: () Delete () Change () Addition Name: DOYLE, JOAN Name: Address: 23730 NAPOLI WAY Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: Title: () Delete Title: () Change () Addition QUEEN, GARY W Name: Name: 10141 ORCHID RIDGE LANE Address: Address: City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: CARR, WILLIAM E Name: 10706 RED CARDINAL CIRCLE Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: Title: (X) Delete Title: () Change () Addition DOYLE, JOAN Name: Name: 23730 NAPOLI WAY Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: Title: () Delete Title: () Change () Addition WILKINSON, ALEXANDRA Name: Name: Address: 4209 SW 14TH AVE Address: CAPE CORAL, FL 33914 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: GARY W. QUEEN T 02/08/2009