

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000000365

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Entity Name:** THE ESTUARY AT EVERGLADES CITY, INC.

**Current Principal Place of Business:**

9090 THE LANE  
NAPLES, FL 34109

**New Principal Place of Business:**

311 SOUTH COPELAND AVE.  
209  
EVERGLADES CITY, FL 34139

**Current Mailing Address:**

9090 THE LANE  
NAPLES, FL 34109

**New Mailing Address:**

P.O. BOX 302  
EVERGLADES CITY, FL 34139

**FEI Number:** 26-1875636

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEHMAN, CHARLES C  
5455 JAEGER ROAD  
NAPLES, FL 34109 US

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

SCHNEIDER, ARTHUR C  
311 SOUTH COPELAND AVE.  
209  
EVERGLADES CITY, FL 334139 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: ARTHUR C. SCHNEIDER

04/21/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: BERGIN, DEBBIE  
Address: 311 SOUTH COPELAND AVE. APT. 215  
City-St-Zip: EVERGLADES CITY, FL 34139

Title: TREA  
Name: SCHNEIDER, ARTHUR  
Address: 311 SOUTH COPELAND AVE. APT 209  
City-St-Zip: EVERGLADES CITY, FL 34139

Title: VP  
Name: CULL, WILLIAM  
Address: 9621 NW 28TH STREET  
City-St-Zip: COOPER CITY, FL 33024

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: ARTHUR C. SCHNEIDER

TREA

04/21/2011

Electronic Signature of Signing Officer or Director

Date