

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

9/2/2008-90030-027-\$70.00-\$70.00

DOCUMENT # N07000002080 1. Entity Name SW FLORIDA FAITH-BASED COALITION, INC.					
Principal Place of Business 4231 DESOTO AVENUE FORT MYERS, FL 33905			Mailing Address 4231 DESOTO AVENUE FORT MYERS, FL 33905		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
BANKS, TRESHA D 3975 E MICHIGAN AVENUE FORT MYERS, FL 33905				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 <i>Tresha Banks</i> Signature, typed or printed name of registered agent and title if applicable.				DATE <i>8/26/08</i> (NOTE: Registered Agent signature required when resigning)	
Filing Fee is \$61.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D ☐ Delete	TITLE	<i>President</i> ☒ Change ☐ Addition		
NAME	DUCLONA, TANYA	NAME	<i>Bruce Arbo</i>		
STREET ADDRESS	1311 SW 10TH TERRACE	STREET ADDRESS	4231 Desoto		
CITY-ST-ZIP	CAPE CORAL, FL 33991	CITY-ST-ZIP	Fort Myers, FL 33905		
TITLE	D ☐ Delete	TITLE	☐ Change ☒ Addition		
NAME	DUCLONA, FORTILUS	NAME	H. Scott Taylor (D)		
STREET ADDRESS	1311 SW 10TH TERRACE	STREET ADDRESS	3502 Edison		
CITY-ST-ZIP	CAPE CORAL, FL 33991	CITY-ST-ZIP	Fort Myers, FL 33916		
TITLE	D ☐ Delete	TITLE	☐ Change ☒ Addition		
NAME	BANKS, TRESHA	NAME	John Billingham		
STREET ADDRESS	3975 E MICHIGAN AVENUE	STREET ADDRESS	3500 Edison Ave		
CITY-ST-ZIP	FORT MYERS, FL 33905	CITY-ST-ZIP	Fort Myers, FL 33916		
TITLE	<i>9/24</i> ☐ Delete	TITLE	☐ Change ☒ Addition		
NAME		NAME	Cynthia Billingham		
STREET ADDRESS		STREET ADDRESS	8113 Breton Circle		
CITY-ST-ZIP		CITY-ST-ZIP	Fort Myers, FL 33912		
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		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: <i>Tresha Banks</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				DATE <i>8/26/08</i> Date	

FILED

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CLERK OF STATE
TALLAHASSEE, FLORIDA



05122008 Chg-NP CR2E037 (12/06)

4. FEI Number *20-8323404* Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required