

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010801

FILED  
Jul 13, 2009  
Secretary of State

**Entity Name:** SOUTHWEST FLORIDA SPEARFISHING CLUB, INC

**Current Principal Place of Business:**

16520 S. TAMiami TRAIL  
#18-185  
FORT MYERS, FL 33908 US

**New Principal Place of Business:**

**Current Mailing Address:**

16520 S. TAMiami TRAIL  
#18-185  
FORT MYERS, FL 33908 US

**New Mailing Address:**

**FEI Number:** 80-0310092 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

MCCALLISTER, FRANK W III  
16520 S. TAMiami TRAIL  
#18-185  
FORT MYERS, FL 33908 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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MCCALLISTER, FRANK W III  
Address: 16520 S. TAMiami TRAIL #18-185  
City-St-Zip: FORT MYERS, FL 33908 US

Title: VP ( ) Delete  
Name: BIGGS, JOHN  
Address: 16520 S. TAMiami TRAIL #18-185  
City-St-Zip: FORT MYERS, FL 33908 US

Title: SCTR ( ) Delete  
Name: GARCY, MARK  
Address: 16520 S. TAMiami TRAIL #18-185  
City-St-Zip: FORT MYERS, FL 33908 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: FRANK W. MCCALLISTER III

P

07/13/2009

Electronic Signature of Signing Officer or Director

Date