

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

DOCUMENT# N10000010252

**FILED**  
**Jul 06, 2011**  
**Secretary of State**

**Entity Name:** TRANSITIONAL HOUSING OF SW FL, INC.

**Current Principal Place of Business:**

6340 EMERALD BAY CT  
FT MYERS, FL 33908

**New Principal Place of Business:**

**Current Mailing Address:**

6340 EMERALD BAY CT  
FT MYERS, FL 33908

**New Mailing Address:**

**FEI Number:** 22-3534932

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FICARELLI, DEBORAH  
6340 EMERALD BAY CT  
FT MYERS, FL 33908 US

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

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:** D  
**Name:** FICARELLI, DEBORAH  
**Address:** 6340 EMERALD BAY CT  
**City-St-Zip:** FT MYERS, FL 33908

**Title:** D  
**Name:** KOCH, THOMAS  
**Address:** 10741 ROBINSON ST  
**City-St-Zip:** FT MYERS, FL 33908

**Title:** D  
**Name:** ANDERSON, THEODORE  
**Address:** 21294 BELLA TERRA BLVD  
**City-St-Zip:** ESTERO, FL 33928

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:** DEBORAH FICARELLI

DF

07/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date