

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000011329

FILED  
Mar 20, 2012  
Secretary of State

**Entity Name:** FREEDOM HOUSE OF FORT MYERS, INC.

**Current Principal Place of Business:**

5252-1 CEDARBEND DR  
FT MYERS, FL 33919

**New Principal Place of Business:**

5252-1 CEDARBEND DR  
FT MYERS, FL 33919 UN

**Current Mailing Address:**

5252-1 CEDARBEND DR  
FT MYERS, FL 33919

**New Mailing Address:**

**FEI Number:** 59-1932120      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

RAAB, ROBERT A JR  
5252-1 CEDARBEND DR  
FT MYERS, FL 33919 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: PD  
Name: RAAB, ROBERT A JR  
Address: 5252-1 CEDARBEND DR  
City-St-Zip: FT MYERS, FL 33919

Title: SD  
Name: NESVIK, ANDREA  
Address: 5252-1 CEDARBEND DR  
City-St-Zip: FT MYERS, FL 33919

Title: TD  
Name: RAAB, ROBERT F  
Address: 7347 HERITAGE PALMS ESTATE DR  
City-St-Zip: FT MYERS, FL 33966

Title: D  
Name: NESVIK, CRAIG  
Address: 12958 KEDLESTON CIR  
City-St-Zip: FT MYERS, FL 33912

Title: D  
Name: RAAB, MIHIJA S  
Address: 7347 HERITAGE PALMS ESTATE DR  
City-St-Zip: FT MYERS, FL 33966

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: ROBERT RAAB

PRES

03/20/2012

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

\_\_\_\_\_  
Date