

05-03-2005 90125 036 ***61.25
N17245

**2005 NOT-FOR-PROFIT CORPORATION
AMENDED ANNUAL REPORT**

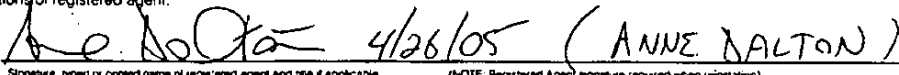
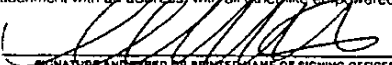
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05 MAY 24 PM 3:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
14015615



04242005 Chg-NP CR2E037 (10/03)

DOCUMENT # N17245			
1. Entity Name LEE COUNTY ARBITRATION/MEDIATION ADVISORY BOARD, INC.			
Principal Place of Business % COURT MEDIATION PROGRAM 2201 SECOND ST., STE 400 FORT MYERS, FL 33901		Mailing Address % COURT MEDIATION PROGRAM 2201 SECOND ST., STE 400 FORT MYERS, FL 33901	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-2734020		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		58.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WILKINSON, WILLIAM D 2000 MAIN STREET STE 402 FT MYERS, FL 33901		7. Name and Address of New Registered Agent Name M. ANNE DALTON Street Address (P.O. Box Number is Not Acceptable) 2044 BAYSIDE PARKWAY City FORT MYERS FL Zip Code 33901	
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  4/26/05 (ANNE DALTON) Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE			
Amended AR is \$61.25		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 NAME STREET ADDRESS CITY-ST-ZIP	DP KANTOR, MARIANNE 2201 SECOND STREET, STE. 400 FT MYERS, FL 33901 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DURICK, HENRY 9165 EAST POMELO RD. FORT MYERS, FL 33912 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DALTON, M. ANNE 2044 BAYSIDE PARKWAY FT. MYERS, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST M. ANNE DALTON ☒ Change ☐ Addition 2044 BAYSIDE PARKWAY FORT MYERS, FL 33901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TAQUECHEL, BEA 1700 MONROE ST FORT MYERS, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VANCE, AUDREY E 9220 BONITA BEACH RD. STE. 108 BONITA SPRINGS, FL 34135 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VANCE, AUDREY E. ☒ Change ☐ Addition 9101 BONITA BEACH RD. BONITA SPRINGS, FL 34135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WILKINSON, WILLIAM D 2000 MAIN STREET STE 402 FORT MYERS, FL 33901 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANN W. SELL ☐ Change ☒ Addition 1342 COLONIAL BLVD., #C-21 FORT MYERS, FL 33907
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:  MARIANNE KANTOR 4-25-05 (239) 694-		Date Daytime Phone # 6292	