

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17245

**FILED**  
**Mar 04, 2010**  
**Secretary of State**

**Entity Name:** LEE COUNTY ARBITRATION/MEDIATION ADVISORY BOARD, INC.

**Current Principal Place of Business:**

% COURT MEDIATION PROGRAM  
2201 SECOND ST., STE 400  
FORT MYERS, FL 33901

**New Principal Place of Business:**

**Current Mailing Address:**

% COURT MEDIATION PROGRAM  
2201 SECOND ST., STE 400  
FORT MYERS, FL 33901

**New Mailing Address:**

**FEI Number:** 59-2734020

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DALTON, M. ANNE  
2044 BAYSIDE PARKWAY  
FT MYERS, FL 33901 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: DP  
Name: SELL, ANN W  
Address: 1342 COLONIAL BLVD, C-21  
City-St-Zip: FT MYERS, FL 33907

Title: DST  
Name: DALTON, M. ANNE  
Address: 2044 BAYSIDE PKWAY  
City-St-Zip: FT. MYERS, FL 33901

Title: D  
Name: BAUCHERT, DARRYL  
Address: 1500 COLONIAL BLVD  
City-St-Zip: FORT MYERS, FL 33997

Title: D  
Name: HAWTHORNE, AMY ESQ  
Address: 2248 FIRST STREET  
City-St-Zip: FT MYERS, FL 33901

Title: D  
Name: JOHNSON, KARL L  
Address: POST OFFICE BOX 2199  
City-St-Zip: FORT MYERS, FL 33902

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: ANN SELL

PRES

03/04/2010

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

\_\_\_\_\_  
Date