2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26630

Name:

Address:

City-St-Zip:

COLLIER, JAMES

202 MAPLE AVE N

FT. MYERS, FL 33922

FILED Jan 18, 2008 Secretary of State

Entity Name: FORT MYERS COIN CLUB, INC. **Current Principal Place of Business: New Principal Place of Business:** FT MYERS COIN CLUB INC 4635 S. DEL PRADO BLVD CAPE CORAL, FL 33904 US **New Mailing Address: Current Mailing Address:** FT MYERS COIN CLUB INC P O BOX 6121 FT MYERS, FL 339116121 US FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GENNARO, MICHAEL A 4635 S. DEL PRADO BLVD. CAPE CORAL, FL 33904 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete LEWIS, GARY Name: Name: 3424 SE 10TH AVE Address: Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: GENNARO, MICHAEL Name: Address: 4635 S DEL PRADO BLVD Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: Title: () Delete Title: (X) Change () Addition NELSON, HOWARD DRUZISKY, DAVID Name: Name: Address: 523 SHADYSIDE ST Address: P.O. BOX 150735 City-St-Zip: LEHIGH ACRES, FL 33936 City-St-Zip: CAPE CORAL, FL 33915 Title: **VPD** () Delete Title: VPD (X) Change () Addition

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.

Name:

Address:

City-St-Zip:

COLLIER, JAMES

FT. MYERS, FL 33908

7091 PHILLIPS CREEK COURT

SIGNATURE: MICHAEL A. GENNARO SD 01/18/2008