

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31105

FILED  
May 23, 2006  
Secretary of State

Entity Name: C-GULLS OF FORT MYERS, INC.

## Current Principal Place of Business:

14840 CRYSTAL COVE CT  
#503  
FORT MYERS, FL 33919 US

## New Principal Place of Business:

## Current Mailing Address:

14840 CRYSTAL COVE CT  
#503  
FORT MYERS, FL 33919 US

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

## Name and Address of New Registered Agent:

HARRINGTON, PAT  
14840 CRYSTAL COVE CT  
#503  
FORT MYERS, FL 33919 US

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: SD ( ) Delete  
Name: HARRINGTON, PAUL  
Address: 14840 CRYSTAL COVE CT #503  
City-St-Zip: FORT MYERS, FL 33919

Title: TD ( ) Delete  
Name: HARRINGTON, PAT  
Address: 14840 CRYSTAL COVE CT  
City-St-Zip: FORT MYERS, FL 33919 US

Title: PD ( ) Delete  
Name: HOLMES, ROGER  
Address: 19861 SUMMERLIN RD., #233  
City-St-Zip: FORT MYERS, FL 33908

Title: VD (X) Delete  
Name: LESKO, DAVID  
Address: 3165 VENUS LANE  
City-St-Zip: NORTH FORT MYERS, FL 33903

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition  
Name: LANE, JOSEPHINE G  
Address: 16512 WELLINGTON LAKES CIRCLE  
City-St-Zip: FORT MYERS, FL 33908

Title: TD (X) Change ( ) Addition  
Name: LANE, BENNIE R  
Address: 16512 WELLINGTON LAKES CIRCLE  
City-St-Zip: FORT MYERS, FL 33908 US

Title: PD (X) Change ( ) Addition  
Name: TORBETT, DANIEL  
Address: 19861 SUMMERLIN RD., #356  
City-St-Zip: FORT MYERS, FL 33908

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: BENNIE R. LANE

TD

05/23/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date