

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N31105

**FILED**  
**Jan 19, 2012**  
**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:** 65-0406897      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

HARRINGTON, PAT  
14840 CRYSTAL COVE CT  
#503  
FORT 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: HOLMES, ROGER  
Address: 19681 SUMMERLIN ROAD #161  
City-St-Zip: FORT MYERS, FL 33908 US

Title: VP  
Name: TORBETT, EVELYN  
Address: 19681 SUMMERLIN ROAD C356  
City-St-Zip: FORT MYERS, FL 33908 US

Title: SD  
Name: SMITH, JACKIE  
Address: 12601 MASTIQUE BEACH BLVD #1502  
City-St-Zip: FORT MYERS, FL 33908 US

Title: TD  
Name: SMITH, WINFIELD  
Address: 12601 MASTIQUE BLVD. #1502  
City-St-Zip: FORT MYERS, FL 33908 US

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: PAT HARRINGTON

DIR

01/19/2012

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

\_\_\_\_\_  
Date