## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N39726

FILED Apr 07, 2009 Secretary of State

Entity Name: CORPORATE FIDUCIARIES ASSOCIATION OF SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

PREASLEY L. GUNHEL ROBIN O'ROURKE

1421 PINE RIDGE RD #100 4001 TAMIAMI TRAIL N. SUITE 100 NAPLES FL 34109

NAPLES, FL 34103

**Current Mailing Address:** New Mailing Address:

PREASLEY L. GUNHEL ROBIN O'ROURKE

1421 PINE RIDGE RD #100 4001 TAMIAMI TRAIL N. SUITE 100 NAPLES, FL 34109

NAPLES, FL 34103

FEI Number: 65-0222033 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GUNHEL, PREASLEY L O'ROURKE, ROBIN 1421 PINÉ RIDGE RD 4001 TAMIAMI TRAIL N. #100 #100 NAPLES, FL 34109 US NAPLES, FL 34103 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: ROBIN O'ROURKE 04/07/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete CLEVELAND, JOSEPH E DE ST. PIERRE, MARTIN Name: Name: 12800 UNIVERSITY DR #125 Address: 4501 N. TAMIAMI TRAIL #102 Address: City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: NAPLES, FL 34103 US

Title: ( ) Delete Title: (X) Change ( ) Addition DE ST. PIERRE, MARTIN Name: GUNHEL, PREASLEY L Name: Address: 4501 N TAMIAMI TR #102 Address: 1421 PINE RIDGE RD. #100

City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34109 US

Title: () Delete Title: (X) Change ( ) Addition STORM, PAMELA J STORM, PAMELA J Name: Name: 3777 TAMIAMI TR N #100 3777 TAMIAMI TR N #100 Address: Address:

City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103 US

Title: () Delete Title: TREA ( ) Change (X) Addition

Name: Name: O'ROURKE, ROBIN B Address: Address: 4001 TAMIAMI TRAIL N. #100 City-St-Zip: City-St-Zip: NAPLES, FL 34103 US

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.

SIGNATURE: ROBIN O'ROURKE **TREA** 04/07/2009