

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

DOCUMENT# N45024

**FILED**  
**Jan 24, 2012**  
**Secretary of State**

**Entity Name:** IMPERIAL RIVER CONSERVANCY, INC.

**Current Principal Place of Business:**

5060 ESPLANADE STREET  
BONITA SPRINGS, FL 34134 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2931  
BONITA SPRINGS, FL 341332931 US

**New Mailing Address:**

**FEI Number:** 65-0287701

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLOUGHBY, RYAN  
22482 FOUNTAIN LAKES BLVD.  
BONITA SPRINGS, FL 34134 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:** WILLOUGHBY, RYAN  
**Address:** 22482 FOUNTAIN LAKES BLVD..  
**City-St-Zip:** BONITA SPRINGS, FL 34134 US

**Title:** VD  
**Name:** PISCITELLI, AL  
**Address:** 8840 SPRINGWOOD CT.  
**City-St-Zip:** BONITA SPRINGS, FL 34135 US

**Title:** STD  
**Name:** MCGRATH, KATHY  
**Address:** 5060 ESPLANADE ST.  
**City-St-Zip:** BONITA SPRINGS, FL 34134 US

**Title:** D  
**Name:** PISCITELLI, AL  
**Address:** 8840 SPRINGWOOD COURT  
**City-St-Zip:** BONITA SPRINGS, FL 34135 US

**Title:** D  
**Name:** CONARD, JOHN  
**Address:** 28028 HARBOR DR.  
**City-St-Zip:** BONITA SPRINGS, FL 34135 US

**Title:** D  
**Name:** PRESTON, JOHN  
**Address:** 3858 RIVIERA CIRCLE  
**City-St-Zip:** BONITA SPRINGS, FL 33134 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:** KATHY MCGRATH

S/T

01/24/2012

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

\_\_\_\_\_  
Date