

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47260

FILED
Jan 25, 2012
Secretary of State

Entity Name: CANDLELIGHTERS OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:

9981 S HEALTH PARK DRIVE
N/A
FORT MYERS, FL 339083618 US

New Principal Place of Business:

Current Mailing Address:

9981 S HEALTH PARK DRIVE
N/A
FORT MYERS, FL 339083618 US

New Mailing Address:

FEI Number: 59-3104008

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNELLBAKER, KLAIR M C/D
15950 LAKE CANDLEWOOD DR
FT MYERS, FL 33908 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: SANTIAGO, JANET
Address: 303 SE 19TH STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: VP
Name: CONSTANTINE, MICHAEL
Address: 17549 LEBANON RD
City-St-Zip: FORT MYERS, FL 33912

Title: T/D
Name: JANSEN, TERESA
Address: 571 KEENAN AVENUE
City-St-Zip: FORT MYERS, FL 33919

Title: C/D
Name: SNELLBAKER, KLAIR M
Address: 15950 LAKE CANDLEWOOD DR
City-St-Zip: FORT MYERS, FL 33908

Title: S/D
Name: HEINTZ, CAROL
Address: 1225 SW SANTA BARBARA PLACE UNIT A
City-St-Zip: CAPE CORAL, FL 33991

Title: D
Name: GAPP, RUTH
Address: 11220 LONGWATER CHASE COURT
City-St-Zip: FORT MYERS, FL 33908

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: KLAIR M. SNELLBAKER

C/D

01/25/2012

Electronic Signature of Signing Officer or Director

Date