

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47606

FILED  
Jan 22, 2007  
Secretary of State

Entity Name: HEALTHY START COALITION OF SOUTHWEST FLORIDA, INC.

## Current Principal Place of Business:

1922 VICTORIA AVE  
SUITE B  
FT MYERS, FL 339013431 US

## New Principal Place of Business:

1921 JEFFERSON AVE  
FT MYERS, FL 33901 US

## Current Mailing Address:

1922 VICTORIA AVE  
SUITE B  
FT MYERS, FL 339013431 US

## New Mailing Address:

1921 JEFFERSON AVE  
FT MYERS, FL 33901 US

FEI Number: 65-0378720

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORTEZ, CATHERINE  
1922 VICTORIA AVE.  
STE. B  
FT MYERS, FL 339013431 US

## Name and Address of New Registered Agent:

CORTEZ, CATHERINE  
1921 JEFFERSON AVE  
FT MYERS, FL 33901 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: CATHY CORTEZ

01/22/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ELLER, STEPHEN  
Address: 9180 ESTERO PARK COMMONS SUITE 8  
City-St-Zip: ESTERO, FL 33928

Title: VP ( ) Delete  
Name: BARAHART, JUANITA  
Address: PO BOX 70  
City-St-Zip: LABELLE, FL 33975

Title: SD ( ) Delete  
Name: LILES, ESQ., PAUL E  
Address: 4315 METRO PKWY. SUITE 510  
City-St-Zip: FORT MYERS, FL 33916

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BARNHART, JUANITA  
Address: PO BOX 70  
City-St-Zip: LABELLE, FL 33975

Title: VP (X) Change ( ) Addition  
Name: GOBY, SUE  
Address: 800 SEAGATE DRIVE - SUITE 202  
City-St-Zip: NAPLES, FL 34103

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

Title: TREA ( ) Change (X) Addition  
Name: YATES, DAVID  
Address: 2283 MAIN STREET  
City-St-Zip: FORT MYERS, FL 33901

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: JUANITA BARNHART

P

01/22/2007

Electronic Signature of Signing Officer or Director

Date