2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002287

FILED Jan 05, 2012 Secretary of State

Entity Name: SOUTHWEST FLORIDA CHAPTER OF THE FLORIDA ASSOCIATION OF ENVIRONMENTAL

PROFESSIONALS, INC.

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

SOUTH FLORIDA WATER MGMT DISTRICT

2301 MCGREGOR BLVD. FORT MYERS, FL 33901 US

Current Mailing Address: New Mailing Address:

SW FAEP PO BOX 1302

FORT MYERS, FL 33902 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

GIBSON, LAUREN 3584 EXCHANGE AVE. NAPLES, FL 34104 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: STERK, JEREMY

Address: DAVIDSON ENGINEERING, 3530 KRAFT RD.

City-St-Zip: NAPLES, FL 34105

Title: VP

Name: GRAY, WHITNEY

Address: SOUTHWEST FLORIDA REGIONAL PLANNING COUNCL

City-St-Zip: FORT MYERS, FL 33902

Title: S

Name: MILLER, MATT Address: SWFAEP

City-St-Zip: FT MYERS, FL 33901

Title:

Name: GIBSON, LAUREN

Address: TURRELL, HALL & ASSOCIATES, INC

City-St-Zip: NAPLES, FL 34104

Title: [

Name: BATTLES, ERICA

Address: HSA ENGINEERING AND SCIENTISTS

City-St-Zip: FORT MYERS, FL 33912

Title: N

 Name:
 ZENCZAK, LYNN

 Address:
 SWFAEP, P.O. BOX 1302

 City-St-Zip:
 FORT MYERS, FL 33902

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: LAUREN GIBSON MRS. 01/05/2012