

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005869

FILED
Apr 26, 2012
Secretary of State

Entity Name: DOWNTOWN MANAGEMENT CORPORATION OF FORT MYERS, FLORIDA, INC.

Current Principal Place of Business:

16400 HEALTHPARK COMMONS DRIVE
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1686
FORT MYERS, FL 33902

New Mailing Address:

FEI Number: 65-0542768

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, SUSAN
16400 HEALTHPARK COMMONS DRIVE
FORT 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: D/P
Name: PIGGOTT, MICHAEL
Address: 2225 1ST STREET
City-St-Zip: FORT MYERS, FL 33901

Title: D/V/P
Name: LEWIS, SUZY
Address: 1406 HENDRY ST.
City-St-Zip: FT. MYERS, FL 33901

Title: D/S
Name: PEREZ, BARBARA
Address: 2961 FRIERSON ST
City-St-Zip: FT. MYERS, FL 33916

Title: D
Name: PAM, LEMMERMAN
Address: 2282 FIRST STREET
City-St-Zip: FORT MYERS, FL 33901

Title: D
Name: ANDY, HOWELL
Address: 1514 BROADWAY
City-St-Zip: FORT MYERS, FL 33901

Title: D
Name: JASON, KOHN
Address: 1520 HENDRY STREET
City-St-Zip: FORT MYERS, FL 33901

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: SUSAN LEWIS

D/V/P

04/26/2012

Electronic Signature of Signing Officer or Director

Date