

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001122

FILED  
Jan 29, 2012  
Secretary of State

**Entity Name:** CALOOSAHATCHEE RIVER CITIZENS ASSOCIATION, INC.

**Current Principal Place of Business:**

1995 LONGFELLOW DR  
FT MYERS, FL 33903

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1165  
FORT MYERS, FL 33902

**New Mailing Address:**

**FEI Number:** 65-0565226

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DALTRY, MARTI  
1995 LONGFELLOW DR.  
N FT MYERS, FL 33903 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: QUASIUS, PETE  
Address: 4523 E RIVERSIDE DR  
City-St-Zip: FORT MYERS, FL 33905

Title: VP  
Name: ENGLAND, MARGARET  
Address: 380 RIVERVIEW DR  
City-St-Zip: LA BELLE, FL 33935

Title: SD  
Name: CAPECE, JOHN  
Address: 18 MARINA DR  
City-St-Zip: LABELLE, FL 33935

Title: T  
Name: DALTRY, MARTI  
Address: 1995 LONGFELLOW DR.  
City-St-Zip: N FT MYERS, FL 33903

Title: T  
Name: ZIMMERLY, RON  
Address: 193 COTTAGE AVE  
City-St-Zip: LABELLE, FL 33935

Title: SD  
Name: MATTOS, LINDA  
Address: 3827 EAST RIVER DR.  
City-St-Zip: FT MYERS, FL 33916

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: RON ZIMMERLY

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01/29/2012

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

\_\_\_\_\_  
Date