## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000002805

FILED Feb 10, 2011 Secretary of State

Entity Name: SOUTHWEST FLORIDA CONCIERGE AND GUEST SERVICES ASSOCIATION, INC.

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

8296 LAUREL LAKES NAPLES, FL 34119 US

Current Mailing Address: New Mailing Address:

P.O. BOX 7126 P.O. BOX 7126

NAPLES, FL 341017126 US

FEI Number: 65-0596974 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JACKSON, SUZANNE 5465 HAWTHORN WOODS WAY NAPLES, FL 34116 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: NEILSEN, JUDY
Address: 8296 LAUREL LAKES
City-St-Zip: NAPLES, FL 34119 US

Title: VP

 Name:
 GERSHEN, NORMA

 Address:
 14802 FRIPP ISLAND COURT

 City-St-Zip:
 NAPLES, FL 34119 US

Title: T

Name: JACKSON, SUZANNE

Address: 5465 HAWTHORN WOODS WAY

City-St-Zip: NAPLES, FL 34116 US

Title:

Name: BECKER, SUSAN

Address: 371 11TH AVENUE SOUTH City-St-Zip: NAPLES, FL 34102 US

Title: MEM

Name: DERMODY, TONIE

Address: 4824 ESPLANADE STREET
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: PF

 Name:
 PURVIS, LAWRENCE

 Address:
 185 MAJORICA CIRCLE

 City-St-Zip:
 MARCO ISLAND, FL 34145 US

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: SUZANNE JACKSON T 02/10/2011