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FILED
Aug 27 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000005647 (0)
1. Corporation Name
**PARTNERS IN SELF-SUFFICIENCY OF LEE COUNTY, FLORID
A, INC.**

Principal Place of Business 3326 MARTIN LUTHER KING, JR. BLVD FT MYERS FL 33916	Mailing Address 3326 MARTIN LUTHER KING, JR. BLVD FT MYERS FL 33916
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 11/04/1996	3a. Date of Last Report
4. FEI Number 65-0713476	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**HILLMYER, BARRY R
2135 COTTAGE ST
FT MYERS FL 33901**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BASHAW, RICHARD G 3326 MARTIN LUTHER KING, JR. BLVD FT MYERS FL 33916 <input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ADAMS, HARRY G 3326 MARTIN LUTHER KING, JR. BLVD FT MYERS FL 33916 <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HAYNES, KATHY 3326 MARTIN LUTHER KING, JR. BLVD FT MYERS FL 33916 <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD COUSLEY, ERICKA B 3326 MARTIN LUTHER KING, JR. BLVD FT MYERS FL 33916 <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MERCADO, ROGER 5860 GOLDEN GATE PARKWAY NAPLES FL 34116 <input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAFER, RICHARD 2911 DEL PRADO BLVD CAPE CORAL FL 33904 <input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition P RICHARD SHERA 16520 S. TAMiami TRAIL FT MYERS FL 33908
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition V MARTHA TORGERSON 2120 MAIN STREET, FT. MYERS, FL 33902
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition ST MERCADO, ROGER 5860 GOLDEN GATE PARKWAY NAPLES, FL 34116
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition D HAFER, RICHARD PASTOR 2911 DEL PRADO BOULEVARD CAPE CORAL, FL 33904
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition D KNIGHT, SYBIL 6327 DEMERY CIRCLE S.E. FT MYERS, FL 33916
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D TOOLE, BILL 2500 EDWARD DR FT MYERS FL 33901

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

D
VELASCO, KERRI
13520 CLEVELAND AVENUE
FT MYERS FL 33903

()Change (☒)Addition