

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005647

FILED
Jul 28, 2004
Secretary of State**Entity Name:** PARTNERS IN SELF-SUFFICIENCY OF LEE COUNTY, FLORIDA, INC.**Current Principal Place of Business:**1700 MEDICAL LANE
FORT MYERS, FL 33907**New Principal Place of Business:****Current Mailing Address:**1700 MEDICAL LANE
FORT MYERS, FL 33907**New Mailing Address:****FEI Number:** 65-0713476**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GERAGHTY, PATRICK E
2069 FIRST ST
FT MYERS, FL 33901 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 () Delete
Name: MILLER, CHRIS
Address: 4595 DIPLOMA COURT
City-St-Zip: LEHIGH ACRES, FL 33971**Title:** T () Delete
Name: GONZALEZ VEGA, IRIS M
Address: 4248 BALLARD RD
City-St-Zip: FORT MYERS, FL 33916**Title:** PD () Delete
Name: HILL, CELIA
Address: 3406 PALM BEACH BLVD
City-St-Zip: FORT MYERS, FL 33916**Title:** D () Delete
Name: SUSAN, LEE
Address: 2351E. MALL DR. #210
City-St-Zip: FORT MYERS, FL 33901**Title:** D () Delete
Name: SEXTON, JEANNE
Address: 7481 DANA LANE CIRCLE
City-St-Zip: NORTH FORT MYERS, FL 33917**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** D (X) Change () Addition
Name: MELLONE, LONG
Address: P.O. BOX 2217
City-St-Zip: FORT MYERS, FL 33902**Title:** VP (X) Change () Addition
Name: ROGER, MERCADO JR
Address: 83 PONDELLA ROAD
City-St-Zip: N FORT MYERS, FL 33903**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D (X) Change () Addition
Name: MARCY, SHAW L
Address: 4427 S.E. 16TH PL, SUITE 2
City-St-Zip: CAPE CORAL, FL 33904**Title:** D (X) Change () Addition
Name: GREGORY, JONES
Address: 1685 MEDICAL LANE
City-St-Zip: FORT MYERS, FL 33907**Title:** T () Change (X) Addition
Name: CARLA, DURAND
Address: 7091 COLLEGE PARKWAY, SUITE 16
City-St-Zip: FORT MYERS, FL 33907

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CELIA HILL

PD

07/28/2004

Electronic Signature of Signing Officer or Director

Date

SHARON PLOVER
2520 S.W. 20TH AVE
CAPE CORAL, FL 33914

IRIS M GONZALEZ
4348 BALLARD RD
FORT MYERS, FL 33916

INAY GAVIN
3648 SUNTRUST DRIVE
FORT MYERS, FL 33916

KAREN CUBLER
6735 KESTREL COURT
FORT MYERS, FL 33912