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Apr 17 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N97000003632 (3)**

1. Corporation Name

**CHILDREN'S ADVOCACY CENTER OF SOUTHWEST FLORIDA, INC.**

Principal Place of Business

Mailing Address

**3900 BROADWAY BLDG B-1  
FORT MYERS FL 33901**

**3900 BROADWAY BLDG B-1  
FORT MYERS FL 33901**

3. Date Incorporated or Qualified

**06/23/1997**

4. FEI Number

**65-0814689**

Applied For  
☐ Not Applicable

2. Principal Place of Business

2a. Mailing Address

**21 3949 Evans Avenue**

**26 3949 Evans Avenue**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**22 Suite 206**

**27 Suite 206**

City & State

City & State

**23 Ft. Myers, FL**

**28 Ft. Myers, FL**

Zip

Country

Zip

Country

**24 33901**

**25**

**29 33901**

**30**

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00 May Be  
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THOMPSON, STEPHEN  
3949 EVANS AVE STE 206  
FT MYERS FL 33901**

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

*Stephen D. Thompson*  
Signature, typed or printed name of registered agent and title if applicable

*(Stephen D. Thompson)*  
(NOTE: Registered Agent signature required when reinstating)

**3/25/98**  
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME **President - DIRECTOR**  
STREET ADDRESS **Stephen D. Thompson**  
CITY - ST - ZIP **3949 Evans Avenue Suite 206  
Ft. Myers, FL 33901**

TITLE ☐ DELETE  
NAME **Director**  
STREET ADDRESS **Jill Turner**  
CITY - ST - ZIP **3900 Broadway Bldg B-1  
Ft. Myers, FL 33901**

TITLE ☐ DELETE  
NAME **Director**  
STREET ADDRESS **Lynn Thompson**  
CITY - ST - ZIP **20801 Grandview Court  
Estero, FL 33928**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I 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.

SIGNATURE:

*Stephen D. Thompson*  
Signature, typed or printed name of registered agent and title if applicable

**3/25/98**

**941 936 5225**

CR2037 (10/97)