

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005527

FILED
Jan 18, 2010
Secretary of State

Entity Name: INTERFAITH ACTION OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:

110 SOUTH SECOND ST.
IMMOKALEE, FL 34142 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 509
IMMOKALEE, FL 34143

New Mailing Address:

FEI Number: 31-1681190

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GYNTHER, BRIGITTE J
110 SOUTH SECOND ST
IMMOKALEE, FL 34142 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
Name: BOLER, JAMES REV.
Address: 11261 JOCANA CT APT 1801
City-St-Zip: FT. MYERS, FL 33908 US

Title: D
Name: MCBRIDE, CHRISTINE
Address: 12171 IONA RD
City-St-Zip: FT. MYERS, FL 33908 US

Title: CC
Name: SMITH, ANN L
Address: 14524 STERLING OAKS DRIVE
City-St-Zip: NAPLES, FL 34110 US

Title: ST
Name: FARNUM, ALLISON REV
Address: 13411 SHIRE LANE
City-St-Zip: FT. MYERS, FL 33912 US

Title: CC
Name: HARP, THOMAS REV.
Address: 1225 PIPER BLVD
City-St-Zip: NAPLES, FL 34110 US

Title: D
Name: MICHAUD, NEIL
Address: 2031 BACKTON ST
City-St-Zip: PORT CHARLOTTE, FL 33948 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: BRIGITTE GYNTHER

D

01/18/2010

Electronic Signature of Signing Officer or Director

Date