2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2004 8:00 am
Secretary of State

02-16-2004 90030 048 ****70.00

J4000031

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1. Entity Name
THE FOSTER CARE COUNCIL OF S.W. FLORIDA, INC.

Principal Place of Business	Mailing Address
3622 WOODLAKE DRIVE S.W. BONITA SPRINGS, FL 34134	3622 WOODLAKE DRIVE S.W. BONITA SPRINGS, FL 34134

02092004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
5051 Castello Dr	5051 Castello Dr
Suite, Apt. #, etc: 21	Suite, Apt. #, etc: 21
City & State: Naples, FL 34103	City & State: Naples, FL 34103
Zip / Country	Zip / Country

4. FEI Number: 59-3598933 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

APPELBAUM, STANLEY
3622 WOODLAKE DRIVE S.W.
BONITA SPRINGS, FL 34134

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________
Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent signature required when reinstating — DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	DP	☐ Delete
NAME	APPELBAUM, STANLEY	
STREET ADDRESS	3622 WOODLAKE DRIVE S.W.	
CITY-ST-ZIP	BONITA SPRINGS, FL 34134	
TITLE	DV	☐ Delete
NAME	SCHULTZEL, LINDA EBERHART	
STREET ADDRESS	210 - 11TH AVENUE SOUTH	
CITY-ST-ZIP	NAPLES, FL 33940	
TITLE	DT	☐ Delete
NAME	SCHULTZEL, LESLIE JOHN	
STREET ADDRESS	210 - 11TH AVENUE SOUTH	
CITY-ST-ZIP	NAPLES, FL 33940	
TITLE	DS	☐ Delete
NAME	SPROAT, VICKI L	
STREET ADDRESS	1715 MONROE STREET	
CITY-ST-ZIP	FORT MYERS, FL 33901	
TITLE	D	☐ Delete
NAME	APPELBAUM, CATHY	
STREET ADDRESS	3622 WOODLAKE DRIVE SW	
CITY-ST-ZIP	BONITA SPRINGS, FL 34134	
TITLE	D	☐ Delete
NAME	WEST, WILLIE	
STREET ADDRESS	376 3RD STREET S. #204	
CITY-ST-ZIP	NAPLES, FL 34102	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Stanley Appelbaum STANLEY APPELBAUM 239-947-2213
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #