

**2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000098927

**FILED  
Jan 13, 2011  
Secretary of State**

**Entity Name:** CSW OF FORT MYERS, INC.

**Current Principal Place of Business:**

6050 ANCHORLINE CT.  
N. FT. MYERS, FL 33917

**New Principal Place of Business:**

**Current Mailing Address:**

6050 ANCHORLINE CT.  
N. FT. MYERS, FL 33917

**New Mailing Address:**

**FEI Number:** 65-1071959      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WALLACE, CRAIG  
6050 ANCHORLINE CT.  
N. FT. MYERS, FL 33917      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:** PD  
**Name:** WALLACE, CRAIG  
**Address:** 6050 ANCHORLINE CT.  
**City-St-Zip:** N. FT. MYERS, FL 33917

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CRAIG WALLACE

PD

01/13/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date