## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P0000098927

1. Entity Name CSW OF FORT MYERS, INC.

**SIGNATURE:** 



FILED Apr 17, 2003 8:00 am Secretary of State

04-17-2003 90163 021 \*\*\*150.00

						OD WE			•				
Principal Plac 6050 ANCHOR N. FT. MYERS	rline CT.	s	6050	g Address Anchorline Ct. Myers FL 33917									
Principal Place of Business     3. Mailing Add					ddress							E 11911 1881 1881	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES					
City & State			City	City & State				4. FEI.Number 65-1071959			Applied For  Not Applicable		
Zip ~		Country	Zip	and the second	Coun	try		·5." (	Certificate of Status Desired		8.75 Adee Requir		
	6. Name	and Address of Cur	rent Registere	d Agent				7. N	Name and Address of New Reg	stered Aç	ent		
						Name							
WALLACE, CRAIG 6050 ANCHORLINE CT. N. FT. MYERS FL 33917							Street Address (P.O. Box Number is Not Acceptable)						
N. FI. MT	EHO FL 33	917				City				FL	Zip Co	de	
	tions of regist					ed office or r			ent, or both, in the State of Florid	a. I am fa	miliar with	n, and accept	
	Signature, typeo	or printed name or registered	agent and the trapp	incable. (NOTI	t: negistere	u Agent signature	Hedriten	WHEILIE	mistaurig)	DATE			
After	r May 1, 200	! FEE IS \$150.00 3 Fee will be \$550 Florida Departme							Election Campaign Finan     Trust Fund Contribution.	cing 🗆		00 May Be ed to Fees	
10.		OFFICERS /	AND DIRECTO	RS	11.			AD	DITIONS/CHANGES TO OFFICE	RS AND	DIRECTO	RS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WALLACE 6050 ANC	, CRAIG HORLINE CT. ERS FL 33917		☐ Delete							Change	☐ Addition	
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indicated of the cor	on this repor	rt or supplemental rep	ort is true and a empowered to	accurate and that nexecute this report	ny signat as requir	ture shall hav	/e the s	ame I	119.07(3)(i), Florida Statutes. I fu legal effect as if made under oatl da Statutes; and that my name a	n; that I an	i an office	er or director	