

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000132641

**FILED**  
**Jan 11, 2011**  
**Secretary of State**

**Entity Name:** THE ALTER EGO BAND OF FORT MYERS, INC.

**Current Principal Place of Business:**

8191 COLLEGE PARKWAY  
#302  
FORT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

8191 COLLEGE PARKWAY  
#302  
FORT MYERS, FL 33919

**New Mailing Address:**

**FEI Number:** 20-1653322

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, WILLIAM R  
8191 COLLEGE PARKWAY  
#204  
FORT MYERS, FL 33919 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:** P,D  
**Name:** BARCLIFT, ROBERT  
**Address:** 8191 COLLEGE PARKWAY, #302  
**City-St-Zip:** FORT MYERS, FL 33919

**Title:** VP,D  
**Name:** FRANSWAY, ANTHONY  
**Address:** 8191 COLLEGE PARKWAY, #302  
**City-St-Zip:** FORT MYERS, FL 33919

**Title:** S,D  
**Name:** COPPIN-CARUSO, TRACY  
**Address:** 8191 COLLEGE PARKWAY, #302  
**City-St-Zip:** FORT MYERS, FL 33919

**Title:** T,D  
**Name:** CARUSO, TODD  
**Address:** 8191 COLLEGE PARKWAY, #302  
**City-St-Zip:** FORT MYERS, FL 33919

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:** TODD CARUSO

TD

01/11/2011

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

\_\_\_\_\_  
Date