

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 25, 2005 8:00 am**  
**Secretary of State**

04-25-2005 90237 032 \*\*\*150.00

DOCUMENT # P94000008667

1. Entity Name

PROFESSIONAL HOME WATCHERS OF S/W FL., INC.



Principal Place of Business

6611 LAKESHORE LANE  
APT.817  
FORT MYERS FL 33912  
US

Mailing Address

P O BOX 61238  
FT MYERS FL 33906  
US

2. Principal Place of Business

9871 Weather Stone Place

3. Mailing Address

Suite, Apt. #, etc.

City & State

Fort Myers, FL

City & State

Fort Myers, FL

Zip

33913

Country

U.S.A.

Zip

33906

Country

US

4. FEI Number

65-0574084

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MEYERS, CHARLES  
6611 LAKESHORE LANE  
FORT MYERS FL 33912

7. Name and Address of New Registered Agent

Name

same

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

9871 Weather Stone Place

City

Fort Myers

FL

Zip Code

33913

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

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2005 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME MEYERS, CHARLES  
STREET ADDRESS 6611 LAKESHORE LANE, APT.817  
CITY-ST-ZIP FORT MYERS FL 33912

TITLE V ☐ Delete  
NAME MEYERS, DAVID J  
STREET ADDRESS 6611 LAKESHORE LANE, APT.817  
CITY-ST-ZIP FORT MYERS FL 33912

TITLE ST ☐ Delete  
NAME MEYERS, GRACE A  
STREET ADDRESS 6611 LAKESHORE LANE, APT.817  
CITY-ST-ZIP FORT MYERS FL 33912

TITLE S ☐ Delete  
NAME MEYERS, MARIANNE  
STREET ADDRESS 6611 LAKESHORE LANE, APT.817  
CITY-ST-ZIP FORT MYERS FL 33912

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE same ☒ Change ☐ Addition  
NAME same  
STREET ADDRESS 9871 Weather Stone Place  
CITY-ST-ZIP Fort Myers, FL 33913

TITLE same ☒ Change ☐ Addition  
NAME same  
STREET ADDRESS 9871 Weather Stone Place  
CITY-ST-ZIP Fort Myers, FL 33913

TITLE same ☒ Change ☐ Addition  
NAME same  
STREET ADDRESS 9871 Weather Stone Place  
CITY-ST-ZIP Fort Myers, FL 33913

TITLE same ☒ Change ☐ Addition  
NAME Marianne Meyers Skubinski  
STREET ADDRESS 11620 Compass Point Drive  
CITY-ST-ZIP Fort Myers, FL 33908-4927

TITLE ☐ Change ☐ Addition  
NAME  
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 607, 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: *Charles Meyers* CHARLES MEYERS, APRIL 20, 2005, 239-561-0075

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #