

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004770

Entity Name: FORT MYERS BEACH COMMUNITY FOUNDATION, INC.**Current Principal Place of Business:**321 SEMINOLE WAY
FT MYERS BEACH, FL 33931**Current Mailing Address:**P.O. BOX 2834
FT MYERS BEACH, FL 33932**FEI Number: 20-8844354****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MULHOLLAND, NANCY G
321 SEMINOLE WAY
FT MYERS BEACH, FL 33931 US*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**Officer/Director Detail :**Title D
Name DUFFY, KATHLEEN
Address 855 SAN CARLOS DRIVE
City-State-Zip: FT MYERS BEACH FL 33931Title D
Name BENNETT, NICOLE
Address 8425 LAGOON RD.
City-State-Zip: FT. MYERS BEACH FL 33931Title D
Name STEINHAGEN, ALICIA
Address 12609 COCONUT CREEK CT.
City-State-Zip: FORT MYERS FL 33908Title TREASURER
Name MULHOLLAND, NANCY
Address 321 SEMINOLE WAY
City-State-Zip: FT. MYERS BEACH FL 33931Title D
Name CERECEDA, ANITA
Address 185 JEFFERSON ST.
City-State-Zip: FT. MYERS BEACH FL 33931Title D
Name PARKER, LOIS
Address 305 DUNDEE RD.
City-State-Zip: FT. MYERS BEACH FL 33931Title SECRETARY
Name BRADFISH, HELEN
Address 5580 AVENIDA PESCADORA
City-State-Zip: FT. MYERS BEACH FL 33931

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

SIGNATURE: NANCY MULHOLLAND**TREASURER****01/10/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date