

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715442

FILED  
May 11, 2005  
Secretary of State

**Entity Name:** COMMUNITY COUNCIL OF LEHIGH ACRES FLORIDA, INC.

**Current Principal Place of Business:**

203 EAST JOEL BLVD., STE. 103  
LEHIGH ACRES, FL 33972 US

**New Principal Place of Business:**

203 EAST JOEL BLVD.  
SUITE 103  
LEHIGH ACRES, FL 33972 US

**Current Mailing Address:**

P.O. BOX 725  
LEHIGH ACRES, FL 339700725

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BAKER, WILLARD  
609 NORTH AVE.  
LEHIGH ACRES, FL 33972 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                      ( ) Delete  
Name: ANGLICKIS, RICHARD A  
Address: 643 GRANDVIEW DRIVE  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: VD                      ( ) Delete  
Name: LANE, CARLO C  
Address: 120 JEFFERSON AVE  
City-St-Zip: LEHIGH ACRES, FL

Title: VD                      ( ) Delete  
Name: KREGER, JAMES  
Address: 2212 E. 6TH STREET  
City-St-Zip: LEHIGH ACRES, FL 33972

Title: TD                      ( ) Delete  
Name: BERGER, MARVIN  
Address: 1205 EAST 3RD ST  
City-St-Zip: LEHIGH ACRES, FL 33972

Title: SD                      ( ) Delete  
Name: MARTIN, REBEKAH  
Address: 5324 BYWOOD STREET  
City-St-Zip: LEHIGH ACRES, FL 33971

Title: SD                      ( ) Delete  
Name: RAPISALDI, SHERRY  
Address: 18 JEFFERSON AVENUE  
City-St-Zip: LEHIGH ACRES, FL 33972

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:                                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: RICHARD A. ANGLICKIS

PRES

05/11/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date