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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **754370**

1. Corporation Name
LEHIGH ACRES CHAMBER OF COMMERCE, INC.

Principal Place of Business	Mailing Address
4109 LEE BLVD. LEHIGH ACRES FL 33971 US	~~4109 LEE BLVD.~~ P.O. P.O. BOX 757 LEHIGH ACRES FL 33971 US

2. Principal Place of Business 21	2a. Mailing Address 26 P. O. Box 757	3. Date Incorporated or Qualifed 09/26/1980
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-1731367 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28 Lehigh Acres FL	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip / Country 24 25	Zip / Country 29 33970 30 USA	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

FERSTER, JOAN
4109 LEE BLVD. & DOUGLAS AVENUE
LEHIGH ACRES FL 33971

10. Name and Address of New Registered Agent

81 Name Debra Shuman
82 Street Address (P.O. Box Number is Not Acceptable) 4109 Lee BLVD.
83
84 City Lehigh Acres **FL** 85 Zip Code 33971

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Debra Shuman — Signature, typed or printed name of registered agent and title if applicable.
Debra Shuman — (NOTE: Registered Agent signature required when reinstating)
5/13/99 — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☒ DELETE	1.1 TITLE	YOUNG, DANEEN-Pres.	☒ Change ☐ Addition
NAME	THOMPSON, KENNETH K. A		1.2 NAME		
STREET ADDRESS	403D JOAN AVE		1.3 STREET ADDRESS	7091 PINNACLE Dr. Suite. E	
CITY-ST-ZIP	LEHIGH ACRES FL 33971		1.4 CITY-ST-ZIP	FT Myers FL 33907	
TITLE	VD	☐ DELETE	2.1 TITLE	V. President	☐ Change ☒ Addition
NAME	YOUNG, DANEEN - HONEY		2.2 NAME	Lloyd Weber	
STREET ADDRESS	7091 PINNACLE PR., STE. E		2.3 STREET ADDRESS	P.O. Box 757	
CITY-ST-ZIP	FT. MYERS FL 33907		2.4 CITY-ST-ZIP	Lehigh Acres, FL 33970	
TITLE	TD	☐ DELETE	3.1 TITLE	Pres. Elect	☒ Change ☐ Addition
NAME	VEALEY, PATTY MATHNEY		3.2 NAME	Patty Vealey	
STREET ADDRESS	1110 HOMESTEAD RD		3.3 STREET ADDRESS	1110 Homestead Rd.	
CITY-ST-ZIP	LEHIGH ACRES FL 33936		3.4 CITY-ST-ZIP	Lehigh Acres FL 33936	
TITLE	PED	☒ DELETE	4.1 TITLE	Treasurer	☐ Change ☒ Addition
NAME	BELL, BEN - ALLSTATE		4. 2 NAME	Vicki Culver	
STREET ADDRESS	1000 LEE BLVD., STE 302		4.3 STREET ADDRESS	9 Homestead Rd	
CITY-ST-ZIP	LEHIGH ACRES FL 33936		4.4 CITY-ST-ZIP	Lehigh Acres FL 33936	
TITLE	MD	☒ DELETE	5.1 TITLE	Executive Dir.	☐ Change ☒ Addition
NAME	FERSTER, JOAN		5.2 NAME	Debra Shuman	
STREET ADDRESS	4109 LEE BLVD. & DOUGLAS AVE.		5.3 STREET ADDRESS	4109 Lee BLVD.	
CITY-ST-ZIP	LEHIGH ACRES FL 33971		5.4 CITY-ST-ZIP	Lehigh Acres FL 33971	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (11/98)

14. 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 annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Debra Shuman — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
5/13/99 — Date
Daytime Phone #