

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754370

FILED
Jan 06, 2006
Secretary of State

Entity Name: LEHIGH ACRES CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

4109 LEE BLVD.
LEHIGH ACRES, FL 33971 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 757
LEHIGH ACRES, FL 33970 US

New Mailing Address:

FEI Number: 59-1731367

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONOVER, OLIVER B
2405 DELRAY PLACE
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: T () Delete
Name: TURBEVILLE, BO TRES
Address: 6261 ARC WAY
City-St-Zip: FORT MYERS, FL 33936

Title: P () Delete
Name: SHUMAN, DEBRA V.P.
Address: 1100 LEE BLVD.
City-St-Zip: LEHIGH ACRES, FL 33936

Title: D () Delete
Name: CONOVER, OLIVER B EXEC.DI
Address: 2405 DELRAY PLACE
City-St-Zip: LEHIGH ACRES, FL 33972

Title: D () Delete
Name: CARRICK, JERE D
Address: 350 HOMESTEAD RD
City-St-Zip: LEHIGH ACRES, FL 33936

Title: D () Delete
Name: ADLER, JOAN D
Address: 1001 SOUTH LOOP BLVD
City-St-Zip: LEHIGH ACRES, FL 33936

Title: D () Delete
Name: EILF, LIZ DIR.
Address: 9 BETH STACEY BLVD STE 206
City-St-Zip: LEHIGH ACRES, FL 33936

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: TURBEVILLE, BO PRES. E
Address: 6261 ARC WAY
City-St-Zip: FORT MYERS, FL 33936

Title: P (X) Change () Addition
Name: ELLIOTT, FRED PRES.
Address: 1400 HOMESTEAD RD. N.
City-St-Zip: LEHIGH ACRES, FL 33936

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

Title: D (X) Change () Addition
Name: ADLER, JOAN TREAS.
Address: 1001 SOUTH LOOP
City-St-Zip: LEHIGH ACRES, FL 33936

Title: D (X) Change () Addition
Name: CARRICK, JERE D
Address: 350 HOMESTEAD RD. S.
City-St-Zip: LEHIGH ACRES, FL 33936

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 Chapter 119, 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: OLIVER B. CONOVER

EXEC

01/06/2006

Electronic Signature of Signing Officer or Director

Date