


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2005 8:00 am
Secretary of State

03-24-2005 90049 021 ****61.25

DOCUMENT # N33576					
1. Entity Name LITERACY VOLUNTEERS OF LEE COUNTY, FL, INC.					
Principal Place of Business 12734 KENWOOD LN. STE. 96 FORT MYERS, FL 33907		Mailing Address 12734 KENWOOD LN. STE. 96 FORT MYERS, FL 33907			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Zip		Country	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
SMITH, LYLE D 12734 KENWOOD LANE SUITE 96 FT MYERS, FL 33907				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL	Zip Code
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JACQUELINE CADKIN			NAME	
STREET ADDRESS	9880 CALOOSA YACHT CLUB DR			STREET ADDRESS	
CITY-ST-ZIP	FT MYERS, FL 33919			CITY-ST-ZIP	
TITLE	D	<input type="checkbox"/> Delete		TITLE	S/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARILYN, FAY			NAME	
STREET ADDRESS	15011 LAKESIDE VIEW DRIVE 2403			STREET ADDRESS	
CITY-ST-ZIP	FORT MYERS, FL 33919			CITY-ST-ZIP	
TITLE	D	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BADAGNANI, FRANK			NAME	
STREET ADDRESS	211 SE 46TH ST			STREET ADDRESS	
CITY-ST-ZIP	CAPE CORAL, FL 33904			CITY-ST-ZIP	
TITLE	D	<input checked="" type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KARNER, MAGGIE			NAME	
STREET ADDRESS	13704 RALEIGH LANE M-5			STREET ADDRESS	
CITY-ST-ZIP	FORT MYERS, FL 33919			CITY-ST-ZIP	
TITLE	TD	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, LYLE			NAME	
STREET ADDRESS	6239 BRIARWOOD TR			STREET ADDRESS	
CITY-ST-ZIP	FORT MYERS, FL 33912			CITY-ST-ZIP	
TITLE	D	<input checked="" type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SPANTI, LUBOV			NAME	see attached list
STREET ADDRESS	4005 SE FIRST STREET			STREET ADDRESS	at 4:30 more directors
CITY-ST-ZIP	CAPE CORAL, FL 33904			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 617, 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: <u>Jacqueline Cadkin</u>		JACQUELIN CADKIN		1/7/05 239 437-4888	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	

50030630



01062005 Chg-NP CR2E037 (10/03)

4. FEI Number 65-0106803 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

FL Zip Code

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME JACQUELINE CADKIN Delete
STREET ADDRESS 9880 CALOOSA YACHT CLUB DR
CITY-ST-ZIP FT MYERS, FL 33919

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME MARILYN, FAY Delete
STREET ADDRESS 15011 LAKESIDE VIEW DRIVE 2403
CITY-ST-ZIP FORT MYERS, FL 33919

TITLE S/D Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME BADAGNANI, FRANK Delete
STREET ADDRESS 211 SE 46TH ST
CITY-ST-ZIP CAPE CORAL, FL 33904

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D Delete
NAME KARNER, MAGGIE
STREET ADDRESS 13704 RALEIGH LANE M-5
CITY-ST-ZIP FORT MYERS, FL 33919

TITLE Change Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE TD
NAME SMITH, LYLE Delete
STREET ADDRESS 6239 BRIARWOOD TR
CITY-ST-ZIP FORT MYERS, FL 33912

TITLE Change Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE D Delete
NAME SPANTI, LUBOV
STREET ADDRESS 4005 SE FIRST STREET
CITY-ST-ZIP CAPE CORAL, FL 33904

TITLE Change Addition
NAME see attached list
STREET ADDRESS at 4:30 more directors
CITY-ST-ZIP

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SIGNATURE: Jacqueline Cadkin JACQUELIN CADKIN 1/7/05 239 437-4888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

~~#~~ N33576

Literacy Volunteers of Lee County, FL, Inc.
Additional Directors

50030630

D

Cripe, Joseph
108 S.E. 12th Court
Cape Coral, FL 33990

D

Stacey, Susan
3322 S.E. 2nd Avenue
Cape Coral, FL 33904

D

Wojtkowski, Isaela
7131 Golden Eagle Court, #721
Fort Myers, FL 33912

D

Mangold, Walter
5730 Trailwinds Drive, #412
Fort Myers, FL 33907