2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Jan 27, 2003 8:00 am Secretary of State DOCUMENT # N34371 01-27-2003 90341 002 ****61.25 1. Entity Name BOYS & GIRLS CLUBS OF LEE COUNTY, INC. Principal Place of Business Mailing Address 12995 S. CLEVELAND AVE. 12995 S. CLEVELAND AVE. STE 163 **STE 163** FORT MYERS FL 33907 FORT MYERS FL 33907 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 59-2013870 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GUNNIN, WILLIAM J Street Address (P.O. Box Number is Not Acceptable) 12995 S. CLEVELAND AVE. STE 163 FORT MYERS FL 33907 City 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. name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. ☐ Delete TITLE TITLE ☐ Change ☐ Addition KOENIG. SCOTT NAME NAME STREET ADORESS 4099 TAMIAMI TRAIL NORTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34101-3021 Delete Change TITLE TITLE ☐ Addition

Hupplesberg, Sue 1619 Del Prado Boulevard RISINGER, CONNIE NAME NAME 14021 METROPOLIS AVE STREET ADDRESS STREET ADDRESS Sepa (oral, 192 33990 CITY-ST-ZIP FORT MYERS FL 33912 CITY-ST-7IP ☐ Delete TITLE TITLE Change Addition PARK: WES-NAME NAME 15611 NEW HAMPSHIRE CT STREET ADDRESS STREET ADDRESS FORT MYERS FL 33908 CITY-ST-ZIP CITY-ST-7IP CFO TITLE Delete TITLE Change Addition MAHER, WILLIAM A NAME NAME STREET ADDRESS 2038 HENLY PL STREET ADDRESS CITY-ST-ZIP FT MYERS FL 33901 CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition Katz. Leonard NAME NAME STREET ADDRESS **506 E CAPE CORAL PARKWAY** STREET ADDRESS CITY-ST-ZIP CAPE CORAL FL CITY-ST-ZIP TITLE ☐ Delete ☐ Change TITLE ☐ Addition NAME Brock, Greg NAME STREET ADDRESS 12557 NEW BRITTANY BLVD, STE 3 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT MYERS FL 33907-3625

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: __i

CR2E037 (10/02)