## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#738889** 

FILED Jul 19, 2006 Secretary of State

**Entity Name:** LEHIGH COMMUNITY SERVICES, INC.

Current Principal Place of Business: New Principal Place of Business:

9 BETH STACY BLVD, #206 LEHIGH ACRES, FL 33936 US

Current Mailing Address: New Mailing Address:

9 BETH STACY BLVD, #206 LEHIGH ACRES, FL 33936 US

FEI Number: 59-1773738 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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: Name and Address of New Registered Agent:

RICE, VERNA L DOSTER, DEBBIE L 1614 RIDGECREST 4114 5TH ST. S.W.

LEHIGH ACRES, FL 33936 US LEHIGH ACRES, FL 33971 US

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: DEBBIE DOSTER 07/19/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P ( ) Delete Title: TREA (X) Change ( ) Addition

 Name:
 CULVER, VICKI
 Name:
 CULVER, VICKI

 Address:
 9 HOMESTEAD RD.
 Address:
 9 HOMESTEAD RD.

 City-St-Zip:
 LEHIGH ACRES, FL 33936
 City-St-Zip:
 LEHIGH ACRES, FL 33936

Title: VD ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 SANDS, JAMES
 Name:
 SANDS, JAMES

 Address:
 PO BOX 1401
 Address:
 PO BOX 1401

City-St-Zip: LEHIGH ACRES, FL 33970 City-St-Zip: LEHIGH ACRES, FL 33970

Title: TD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 DOSTER, DEBBIE L
 Name:

 Address:
 4114 5TH STREET S.W.
 Address:

 City-St-Zip:
 LEHIGH ACRES, FL 33971
 City-St-Zip:

Title: D ( ) Delete Title: VP (X) Change ( ) Addition Name: GOLDSBERRY, JOHN Name: GOLDSBERRY, JOHN Address: 1413 CAYWOOD CIRCLE S. 4ddress: 1413 CAYWOOD CIRCLE S.

Address: 1413 CAYWOOD CIRCLE S. Address: 1413 CAYWOOD CIRCLE S
City-St-Zip: LEHIGH ACRES, FL 33936 City-St-Zip: LEHIGH ACRES, FL 33936

Title: D () Delete Title: D (X) Change () Addition

 Name:
 KESSLER, MYRA,
 Name:
 KESSLER, MYRA,

 Address:
 201 E JOEL BLVD
 Address:
 305 THOMPSON AVE.

 City-St-Zip:
 LEHIGH ACRES, FL 33936
 City-St-Zip:
 LEHIGH ACRES, FL 33972

Title: D () Delete Title: () Change () Addition

 Name:
 THOMPSON, KEN
 Name:

 Address:
 1150 LEE BLVD
 Address:

 City-St-Zip:
 LEHIGH ACRES, FL 33936
 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: VICKI CULVER TREA 07/19/2006

Electronic Signature of Signing Officer or Director

Date