2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#738889

Apr 20, 2007 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 ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DOSTER, DEBBIE L

4114 5TH ST. S.W.

9 N. HOMESTEAD RD.

15 HIGH AGRES FL 22024

LEHIGH ACRES, FL 33971 US LEHIGH ACRES, FL 33936 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: VICKI Z. CULVER 04/20/2007

Electronic Signature of Registered Agent Date

City-St-Zip:

OFFICERS AND DIRECTORS:

City-St-Zip:

LEHIGH ACRES, FL 33970

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

LEHIGH ACRES, FL 33970

Title: TREA () Delete Title: TREA (X) Change () Addition Name: CULVER, VICKI Z

Address: 9 HOMESTEAD RD. Address: 9 HOMESTEAD RD.
City-St-Zip: LEHIGH ACRES, FL 33936 City-St-Zip: LEHIGH ACRES, FL 33936

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

 Name:
 SANDS, JAMES
 Name:
 SANDS, JAMES

 Address:
 PO BOX 1401
 Address:
 PO BOX 1401

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

Name:GOLDSBERRY, JOHNName:THOMPSON, KENNETHAddress:1413 CAYWOOD CIRCLE S.Address:1150 LEE BLVDE..

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

Title: D () Delete Title: SEC. (X) Change () Addition Name: KESSLER, MYRA, Name: THROWER, MARTHA, Address: 305 THOMPSON AVE. Address: 116 KIMDALE.

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

Title: D () Delete Title: D (X) Change () Addition Name: THOMPSON, KEN Name: KESSLER, MYRA

Address: 1150 LEE BLVD Address: 305 THOMPSON
City-St-Zip: LEHIGH ACRES, FL 33936 City-St-Zip: LEHIGH ACRES, FL 33936

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

 Name:
 Name:
 MORSE, JACK

 Address:
 Address:
 25 HOMESTEAD RD.

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

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 Z. CULVER TREA 04/20/2007