2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2009
Secretary of State

DOCUMENT# N08000008270

Entity Name: LILLY'S PROJECT OF LEE COUNTY, INC.

Current Principal Place of Business:

13305 BROADHURST LOOP
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

PO BOX 3071
FORT MYERS BEACH, FL 33932

New Mailing Address:

FEI Number: 26-3554598 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SEARS, NORA L
13305 BROADHURST LOOP
FORT MYERS, FL 33919 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: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Change (X) Addition
Name: SEARS, NORA L
Address: 13305 BROADHURST LOOP
City-St-Zip: FORT MYERS, FL 33919 LE

Title: VP ( ) Change (X) Addition
Name: REYDELL, KITTY
Address: 13391 GATEWAY ROAD
City-St-Zip: FORT MYERS, FL 33919 LE

Title: S ( ) Change (X) Addition
Name: FITZGERALD, CONSTANCE
Address: 1715 MONROE STREET
City-St-Zip: FORT MYERS, FL 33901 LE

Title: T ( ) Change (X) Addition
Name: HOWARD, KIM
Address: 1715 MONROE STREET
City-St-Zip: FORT MYERS, FL 33901 LE

I hereby certify that the information supplied with this filing does not qualify 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: NORA L. SEARS P 04/12/2009

Electronic Signature of Signing Officer or Director — Date