

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738889

Entity Name: LEHIGH COMMUNITY SERVICES, INC.

FILED
Apr 08, 2014
Secretary of State
CC3670948157

Current Principal Place of Business:

201 PLAZA DR
SUITE 103
LEHIGH ACRES, FL 33936

Current Mailing Address:

201 PLAZA DRIVE
SUITE 103
LEHIGH ACRES, FL 33936 US

FEI Number: 59-1773738

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NICELY, CHARLOTTE REXECDIR
201 PLAZA DR
SUITE 103
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:

Electronic Signature of Registered Agent Date

Officer/Director Detail :

Title PRES
Name HUMFLEET, ALLEN
Address 530 KELLER ST.
City-State-Zip: LEHIGH ACRES FL 33974

Title VP
Name ELLIOTT, FRED
Address 1400 HOMESTEAD RD N.
City-State-Zip: LEHIGH ACRES FL 33974

Title SECRETARY
Name GORDON, JOAN ADLER
Address 11133 OXBRIDGE WAY
City-State-Zip: FORT MYERS FL 33913

Title TREASURER
Name CALDWELL, MATTHEW
Address 19 BURNSTONE AV
City-State-Zip: LEHIGH ACRES FL 33936

Title DIRECTOR
Name GOODLAD, TERESA
Address 702 LEELAND HEIGHTS BLVD
City-State-Zip: LEHIGH ACRES FL 33936

Title DIRECTOR
Name WHEELER-EDISON, ANGELA
Address 1408 CLEVELAND AV
City-State-Zip: LEHIGH ACRES FL 33972

Title DIRECTOR
Name TURBEVILLE, BO
Address P.O. BOX 60011
City-State-Zip: FORT MYERS FL 33906

Title DIRECTOR
Name GAREISS, CANDY
Address 1500 LEE BLVD.
City-State-Zip: LEHIGH ACRES FL 33936

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I hereby 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 all other like empowered.

SIGNATURE: CHARLOTTE RAE NICELY

EXECUTIVE DIRECTOR

04/08/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name TERSEN, SHARON
Address 1013 DESOTO AV
City-State-Zip: LEHIGH ACRES FL 33972

Title DIRECTOR
Name PITTS, EDDIE
Address 61 BELL BLVD.
City-State-Zip: LEHIGH ACRES FL 33936

Title CEO
Name NICELY, CHARLOTTE R
Address 201 PLAZA DR SUITE 103
City-State-Zip: LEHIGH ACRES FL 33936

Title DIRECTOR
Name VEALEY, JACKSON
Address 7 EAST GREENS
City-State-Zip: LEHIGH ACRES FL 33936