2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738889

Entity Name: LEHIGH COMMUNITY SERVICES, INC.

Current Principal Place of Business:

201 PLAZA DR SUITE 103

LEHIGH ACRES, FL 33936

FILED Apr 20, 2017 **Secretary of State** CC3659314836

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 RAE 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: CHARLOTTE RAE NICELY

04/20/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title IMMEDIATE PAST PRESIDENT Title **PRESIDENT** Name ELLIOTT, FRED Name TURBEVILLE, BO

Address 1400 HOMESTEAD RD. Address P.O. BOX 60011

COLDWELL BANKER PREFERRED ACCENT BUSINESS PRDUCTS

PROPERTIES City-State-Zip: FORT MYERS FL 33906

Title

LEHIGH ACRES FL 33936 City-State-Zip:

DIRECTOR Title **SECRETARY** Name LINDSEY, JIM BARRY, MELISSA Name

Address 3160 ANTICA ST Address 219 PLAZA DRIVE

City-State-Zip: FORT MYERS FL 33905 L.A. SENIOR CENTER

City-State-Zip: LEHIGH ACRES FL 33936 Title **TREASURER**

Name BARROSO, ISABEL ESQ. Title CEO

NICELY, CHARLOTTE R Address 13350 METRO PARKWAY Name

SUITE 304

201 PLAZA DR SUITE 103 Address FORT MYERS FL 33966 City-State-Zip:

City-State-Zip: LEHIGH ACRES FL 33936

Title **DIRECTOR AT LARGE** CONRAD, KIM Name CALDWELL, MATTHEW Name

1200 HOMESTEAD RD. Address Address

G. WEAVER HIPPS ELEMENTARY 15191 HOMESTEAD RD. FLORIDA HOUSE OF

Title

DIRECTOR

LEHIGH ACRES FL City-State-Zip: REPRESENTATIVES

LEHIGH ARES FL 33971 City-State-Zip: Continues on page 2

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.

04/20/2017 SIGNATURE: CHARLOTTE RAE NICELY EXECUTIVE DIRECTOR

Officer/Director Detail Continued:

TitleDIRECTORTitleVICE- PRESIDENTNameDICKERSON, BARRYNameGOODLAD, TERESA

Address 715 THOMAS SHERWIN AV Address 702 LEELAND HEIGHTS BLVD

EAST LEE COUNTY HIGH SCHOOL

City-State-Zip: LEHIGH ACRES FL 33936

City-State-Zip: LEHIGH ACRES FL 33974

Title DIRECTOR Title BOOKKEEPER

Name PEPLOW, CAROLYN
Name MOORE, DORIS

Address 20062 LAKE VISTA CIRCLE Address 201 PLAZA DRIVE SUITE 103

City-State-Zip: LEHIGH ACRES FL 33936 City-State-Zip: LEHIGH ACRES FL 33936