

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000002597

**Entity Name:** LEE RESEARCH AND DEVELOPMENT ENTERPRISES CORP.

**Current Principal Place of Business:**

834 SW 1ST STREET  
FLORIDA CITY , FL 33034

**Current Mailing Address:**

LEE RESEARCH AND DEVELOPMENT ENTERPRISES CORP.  
815 N HOMESTEAD BLVD 632  
HOMESTEAD, FL 33030 US

**FEI Number:** 45-0625959

**Certificate of Status Desired:** No

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

LEE, DEMARIO C  
834 SW 1ST STREET  
FLORIDA CITY , FL 33034 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 P  
Name LEE, DEMARIO C SR.  
Address 834 SW 1ST STREET  
City-State-Zip: FLORIDA CITY FL 33034

Title CHAIRMAN  
Name LEE-GAYTON, DYLAN  
Address 834 SW 1ST STREET  
City-State-Zip: FLORIDA CITY FL 33034

Title TREASURER  
Name TENNER, VERLENE  
Address 113 NE 12TH AVE  
City-State-Zip: HOMESTEAD FL 33034

Title OFFICER  
Name LEE, MARJONIQUE  
Address 834 SW 1ST STREET  
City-State-Zip: FLORIDA CITY FL 33034

Title OFFICER  
Name LEE, KAMRYN  
Address 834 SW 1ST STREET  
City-State-Zip: FLORIDA CITY FL 33034

*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:** DEMARIO LEE

**PRESIDENT**

**04/30/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date