

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000002161

**Entity Name:** LEE COAST CHAPTER, MILITARY OFFICERS ASSOCIATION OF AMERICA, INC.**FILED**  
**Jan 24, 2022**  
**Secretary of State**  
**1096316922CC****Current Principal Place of Business:**16290 KELLY COVE DRIVE  
#254  
FORT MYERS, FL 33908**Current Mailing Address:**16290 KELLY COVE DRIVE  
#254  
FORT MYERS, FL 33908 US**FEI Number: 45-4378924****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LEECHAN, MARILYN L.  
16290 KELLY COVE DRIVE  
#254  
FORT MYERS, FL 33908 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: MARILYN L. LEECHAN****01/24/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :****Title** PRESIDENT  
**Name** MOORE, TIMOTHY  
**Address** 9291 BELDING DRIVE  
**City-State-Zip:** SANIBEL FL 33957-3001**Title** VP  
**Name** EPKINS, STEVE  
**Address** 9361 TRIANA TERRACE  
APT 1  
**City-State-Zip:** FT. MYERS FL 33912-0958**Title** SECRETARY  
**Name** GAIL, WHITE-SURICO  
**Address** 13851 EAGLE RIDGE LAKES DRIVE  
#102  
**City-State-Zip:** FORT MYERS FL 33912-1793**Title** DIRECTOR & WEBMASTER  
**Name** GALGANO, TERESA  
**Address** 4701 LAKESIDE CLUB BLVD  
#22  
**City-State-Zip:** FORT MYERS FL 33905**Title** TREASURER  
**Name** LEECHAN, MARILYN L.  
**Address** 16290 KELLY COVE DRIVE  
#254  
**City-State-Zip:** FORT MYERS FL 33908**Title** DIRECTOR  
**Name** TRIFTSHAUSER, ROGER  
**Address** 13155 COASTAL LINKS COURT  
**City-State-Zip:** FORT MYERS FL 33908**Title** DIRECTOR  
**Name** BONDURANT, FRED  
**Address** 9125 MOCKINGBIRD DRIVE  
**City-State-Zip:** SANIBEL FL 33957-3626

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: MARILYN L. LEECHAN****TREASURER (AGENT)****01/24/2022**

Electronic Signature of Signing Officer/Director Detail

Date