

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H20996

**Entity Name:** LEE PROPERTIES, INC.**Current Principal Place of Business:**6509 HAZELTINE NATIONAL DR  
SUITE 6  
ORLANDO, FL 32822**Current Mailing Address:**6509 HAZELTINE NATIONAL DR  
SUITE 6  
ORLANDO, FL 32822**FEI Number:** 59-2469622**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEE, RICHARD T  
6509 HAZELTINE NATIONAL DR  
SUITE 6  
ORLANDO, FL 32822 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	PD
Name	LEE, RICHARD T
Address	6509 HAZELTINE NATIONAL DRIVE, STE 6
City-State-Zip:	ORLANDO FL 32822

Title	VTD
Name	LEE, KATHLEEN S
Address	6509 HAZELTINE NATIONAL DRIVE, STE 6
City-State-Zip:	ORLANDO FL 32822

Title	VD
Name	BARROW, LORRAYNE L
Address	6509 HAZELTINE NATIONAL DRIVE, STE 6
City-State-Zip:	ORLANDO FL 32822

Title	V
Name	JOHNSON, MICHELLE L
Address	6509 HAZELTINE NATIONAL DRIVE, STE 6
City-State-Zip:	ORLANDO FL 32822

Title	V
Name	LEE, THOMAS G II
Address	6509 HAZELTINE NATIONAL DRIVE, STE 6
City-State-Zip:	ORLANDO FL 32822

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RICHARD T LEE

PD

02/24/2016

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