

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700398

FILED  
Jan 09, 2012  
Secretary of State

**Entity Name:** LEE COUNTY SHERIFF'S POSSE, INC.

**Current Principal Place of Business:**

PALM CREEK DR  
FT. MYERS, FL 33903

**New Principal Place of Business:**

**Current Mailing Address:**

17400 NALLE RD  
NORTH FORT MYERS, FL 33917

**New Mailing Address:**

**FEI Number:** 59-2650054

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CROSS, KATHLEEN  
17400 NALLE RD  
NORTH FORT MYERS, FL 33917 US

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

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

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** CROSS, KATHLEEN  
**Address:** 17400 NALLE RD  
**City-St-Zip:** FT MYERS, FL 33917

**Title:** D  
**Name:** CROSS, BILL  
**Address:** 17400 NALLE RD  
**City-St-Zip:** NORTH FT MYERS, FL 33917

**Title:** S/T  
**Name:** DETZEL, ANNETTE  
**Address:** 13213 4TH STREET  
**City-St-Zip:** FORT MYERS, FL 33905

**Title:** D  
**Name:** MATTHEWS, BARRY  
**Address:** 10771 BRAHMA RD  
**City-St-Zip:** FT MYERS, FL 33905

**Title:** VP  
**Name:** HARRISON, BARBARA J  
**Address:** 10731 SHARON DR  
**City-St-Zip:** FT. MYERS, FL 33917

**Title:** D  
**Name:** CURRY, AL  
**Address:** 275 KIRBY THOMPSON RD  
**City-St-Zip:** LABELLE, FL 33935

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:** KATHLEEN CROSS

D

01/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date