

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705512

FILED  
Jan 04, 2011  
Secretary of State

**Entity Name:** LEE COUNTY YOUNG MEN'S CHRISTIAN ASSOCIATION, INC.

**Current Principal Place of Business:**

1360 ROYAL PALM SQUARE BLVD.  
FT. MYERS, FL 33919

**New Principal Place of Business:**

1360 ROYAL PALM SQUARE BLVD.  
FT. MYERS, FL 33919 US

**Current Mailing Address:**

1360 ROYAL PALM SQUARE BLVD.  
FT. MYERS, FL 33919

**New Mailing Address:**

1360 ROYAL PALM SQUARE BLVD.  
FT. MYERS, FL 33919 US

**FEI Number:** 59-1112701

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SANGER, JAMES K CEO  
1360 ROYAL PALM SQUARE BLVD.  
FORT MYERS, FL 33919 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: CEO  
Name: SANGER, JR., JAMES K  
Address: 1360 ROYAL PALM SQUARE BLVD.  
City-St-Zip: FORT MYERS, FL 33919 US

Title: P  
Name: MATTINGLY, BILL  
Address: 1470 XAVIER AVENUE  
City-St-Zip: FORT MYERS, FL 33919 US

Title: D  
Name: KIBURZ, SAM  
Address: 8060 COLLEGE PARKWAY SE  
City-St-Zip: FORT MYERS, FL 33919 US

Title: D  
Name: BROOKE, JONATHAN  
Address: P O BOX 6187  
City-St-Zip: FORT MYERS, FL 33911 US

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: JAMES K. SANGER, JR

CEO

01/04/2011

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

\_\_\_\_\_  
Date