2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#712480

FILED Apr 15, 2009 Secretary of State

Entity Name: LEE COUNTY LEGAL AID SOCIETY, INC.

Current Principal Place of Business: New Principal Place of Business:

2211 PECK STREET 2211 WIDMAN WAY

SUITE 600 SUITE 600

FT MYERS, FL 33901 US FT MYERS, FL 33901 US

New Mailing Address: Current Mailing Address:

PO BOX 9205

FT MYERS, FL 33902 US

FEI Number: 59-1163686 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

STREYFFELER, KURT SIMMONS, AUGUSTIN 2211 PECK ST 2250 FIRST ST. SUITE 250 US

FORT MYERS, FL 33901 FORT MYERS, FL 33901 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: AUGUSTIN SIMMONS 04/15/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

STREYFFELER, KURT SIMMONS, AUGUSTIN Name: Name:

2211 PECK ST SUITE 250 Address: 2250 FIRST ST. Address:

City-St-Zip: FORT MYERS, FL 33901 US City-St-Zip: FORT MYERS, FL 33901 US

Title: () Delete Title: () Change () Addition

SELL, ANN Name: Name: Address: 1342 COLONIAL BLVD., BLDG, C-21 Address: City-St-Zip: FORT MYERS, FL 33907 City-St-Zip:

Title: () Delete Title: () Change () Addition

BAIER, DENISE Name: Name: 1342 COLONIAL BLVD., BLGD C-21 Address: Address:

City-St-Zip: FORT MYERS, FL 33901 City-St-Zip:

Title: () Delete Title: () Change () Addition

Name: BAUCHERT SR, DARRYLL Name: Address: 1540 COLONIAL BLVD. SUITE 104 Address: City-St-Zip: FORT MEYERS, FL 33907 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

GERRICK, ROBERT STREYFFELER, KURT Name: Name: 17155 KNIGHT DR. 2211 WIDMAN WAY SUITE 250 Address: Address: City-St-Zip: FORT MYERS, FL 33912 City-St-Zip: FORT MYERS, FL 33901

Title: (X) Delete Title: () Change () Addition

SIMMONS, GUS Name: Name: Address: 2250 FIRST ST. Address: FORT MYERS, FL 33901 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: AUGUSTIN SIMMONS DP 04/15/2009

Electronic Signature of Signing Officer or Director

Date