

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 18 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 716173 (0)

1. Corporation Name

LEE MENTAL HEALTH CENTER, INC.



Principal Place of Business

2789 ORTIZ AVE
FORT MYERS FL 33905-7806
US

Mailing Address

2789 ORTIZ AVE
FORT MYERS FL 33905-7806
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified
03/10/1969

3a. Date of Last Report
05/01/1996

4. FEI Number

59-1287693

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes ☐ No ☒

9. Name and Address of Current Registered Agent

AUSTIN, BOB
17404 HOMEWOOD RD
FORT MYERS FL 33912

10. Name and Address of New Registered Agent

81 Name

Elizabeth O Harman

82 Street Address (P.O. Box Number is Not Acceptable)

1592 Covington Cr

83

84 City

Ft Myers

FL

85 Zip Code

33919

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

3/13/97

12. OFFICERS AND DIRECTORS

TITLE PD
NAME SHELTON, LOUISE
STREET ADDRESS 2727 WINKLER AVE
CITY-ST-ZIP FT MYERS FL

TITLE SD
NAME AUSTIN, BOB
STREET ADDRESS 17404 HOMEWOOD RD
CITY-ST-ZIP FT. MYERS FL

TITLE D
NAME ISAACS, MADELYN L.
STREET ADDRESS 6577 E TOWN & RIVER RD
CITY-ST-ZIP FT MYERS FL

TITLE D
NAME MACDOUGALL, KAY
STREET ADDRESS 18689 WATERS EDGE CT
CITY-ST-ZIP FT MYERS F

TITLE D
NAME HAYWARD, ARCHIE
STREET ADDRESS 2072 VICTORIA AVE
CITY-ST-ZIP FT MYERS FL

TITLE D
NAME JOHNSON, MARY
STREET ADDRESS 1260 VESPER DR
CITY-ST-ZIP FT MYERS, FL 00000

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE PD
2.2 NAME Joseph Mazurkiewicz
2.3 STREET ADDRESS 3206 SW 7th Pl
2.4 CITY-ST-ZIP Cape Coral FL 33914

3.1 TITLE VD
3.2 NAME Joan Cabai
3.3 STREET ADDRESS 12811 Kenwood Ln
3.4 CITY-ST-ZIP Ft Myers FL 33907

4.1 TITLE ID
4.2 NAME Frank Duval Jr
4.3 STREET ADDRESS 247 Connecticut Ave
4.4 CITY-ST-ZIP Ft Myers FL 33905

5.1 TITLE SD
5.2 NAME Elizabeth O Harman
5.3 STREET ADDRESS 1592 Covington Cr
5.4 CITY-ST-ZIP Ft Myers FL 33919

6.1 TITLE D
6.2 NAME Helen Nichols
6.3 STREET ADDRESS 2835 SE 16th Pl
6.4 CITY-ST-ZIP Cape Coral FL 33904

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed or on an attachment with an address.

Elizabeth O Harman

CR2E037 (9/96)

LEE MENTAL HEALTH CENTER, INC.

Attachment to 1997 Corporation Annual Report
(#13 - Additions to Officers and Directors)

D

Barry Hillmeyer
N/A - P.O. Box 960
Fort Myers, Florida 33902

D

John Sweatlock
18418 Orange Crest Court
Lehigh Acres, Florida 33936

D

Lee Duffus, Ph.D.
8111 College Parkway
Fort Myers, Florida 33919

D

Vasanta Senerat
4531 DeLeon Street
Fort Myers, Florida 33907

D

Nan Rodriguez
N/A - P.O. Box 150027
Cape Coral, Florida 33915

D

Michael Reitman
4571 Colonial Boulevard
Fort Myers, Florida 33912

D

James Reilly
3026 E. Riverside Dr.
Fort Myers, Florida 33901

D

Guillermo Bohm, M.D.
2675 Winkler Ave.
Fort Myers, Florida 33907

D

Ruth Cooper, Ph.D.
1006 S.E. 14th Terr.
Cape Coral, Florida 33990