FILED 2001 UNIFORM BUSINESS REPORT (UBR) Aug 31, 2001 8:00 am Secretary of State DOCUMENT # 722163 08-31-2001 90111 024 ****61.25 MEALS ON WHEELS OF LEE COUNTY, FLORIDA, INC. Principal Place of Business Mailing Address **%LEE MEMORIAL HOSPITAL** PO BOX 642 2776 CLEVELAND AVE. FT. MYER\$ FL 33902 FORT MYERS FL 33901 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1458037 Not Applicable Zin Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MICHREL S. LYNCH Box Number is Not Acceptable) LAKELAND CIRCLE CATZ, ROCHELLE Z 6361 PRESIDENTIAL CT. STE. B FT. MYERS FL 33919 City FORT MYERS 8. 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 Michael S. Lynch-FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. After September 12, 2001, min. will be \$236.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. ☐ Delete TITLE TITLE Change ☐ Addition HOOPER, STEPHEN BRIAN RASNICK NAME NAME LEE JUSTICE CENTER 1700 MONROE ST STREET ADDRESS STREET ADDRESS **CR2E037** 150 TAMIAMI TRAL SUITE 603 CITY-ST-ZIP FT MYERS FL 33901 CITY-ST-ZIP NAPHES **Change** TITLE ☐ Delete TITLE ☐ Addition **ELLIOTT, JERRY** NAME NAME JANETTE L'HEUREUX STREET ADDRESS 8250 COLLEGE PARK WAY STREET ADDRESS 12771 WORLD PLAZA LN Ste. 2 CITY-ST-ZIP FT MYERS FL 33919 CITY-ST-ZIP MYCRS 33907 TITLE TITLE ☐ Delete Change Addition TIHAN SARCHAT, MARILEE NAME NAME MICHARLS, LYNCH. STREET ADDRESS 7275 CONCOURSE DRIVE STREET ADDRESS 11073 LAKELAND CIR

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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FT. MYERS FL 33908

3406 PALM BEACH BLVD

FT MYERS FL 33916

HILL, CELIA B

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8 - 21 - 2001

FORT MYERS FL

JERRY ELLIOTT 8250 College PARLWAY

> 941 748 -6192

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