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CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # 725726 (4)

1. Corporation Name

LEHIGH ACRES FISH ORGANIZATION, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -3 PM 1:43

Principal Place of Business

Mailing Address

111 ORTONA STREET
LEHIGH ACRES FL 33936-5333
US

111 ORTONA STREET
LEHIGH ACRES FL 33936-5333
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/05/1973

3a. Date of Last Report
03/11/1994

4. FEI Number

59-1540834

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

5. Certificate of Status Desired

☐ \$6.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒ \$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ANDERTON, RICHARD L.
111 ORTONA STREET
LEHIGH ACRES FL 33936

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reestablishing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

NAME

LEE, HARRY C.

STREET ADDRESS

111 ORTONA STREET

CITY-ST-ZIP

LEHIGH ACRES, FL 00000

TITLE

D

NAME

SCHOREDER, DOROTHY

STREET ADDRESS

1642 COUNTRY CLUB PKWY

CITY-ST-ZIP

LEHIGH ACRES, FL 00000

TITLE

PD

NAME

ANDERTON, RICHARD L.

STREET ADDRESS

111 ORTONA STREET

CITY-ST-ZIP

LEHIGH ACRES, FL 00000

TITLE

VD

NAME

SOMMERS, ARTHUR

STREET ADDRESS

312 HOLLYWOOD ST S.E.

CITY-ST-ZIP

LEHIGH ACRES, FL 00000

TITLE

TD

NAME

SILAKOWSKI, DOROTHY

STREET ADDRESS

716 SHADYSIDE STREET

CITY-ST-ZIP

LEHIGH ACRES, FL 00000

TITLE

S

NAME

PRICE, THOMAS J.

STREET ADDRESS

803 WILLOW DRIVE

CITY-ST-ZIP

LEHIGH ACRES, FL 00000

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Richard L. Anderton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD L. ANDERTON

01/14/95

813-369-2671

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