

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90279 019 ****61.25

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1. Entity Name

MYERLEE COUNTRY CLUB, INC.



Principal Place of Business

1380 MYERLEE COUNTRY CLUB BLVD.
FT. MYERS FL 33919

Mailing Address

1380 MYERLEE COUNTRY CLUB BLVD.
FT. MYERS FL 33919

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1461386

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MORGAN, RANKIN
1380 MYERLEE COUNTRY CLUB BLVD.
FT MYERS FL 33919

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete
NAME RANKIN, MORGAN
STREET ADDRESS 1285 N. BRANDYWINE CR.
CITY-ST-ZIP FORT MYERS FL 33919

TITLE DVP ☐ Delete
NAME DEUTSCH, LEO
STREET ADDRESS 1461 PALM WOOD DR.
CITY-ST-ZIP FORT MYERS FL 33919

TITLE DT ☒ Delete
NAME HUMPHREY, DONNA
STREET ADDRESS 6882 GRIFFIN BLVD.
CITY-ST-ZIP FORT MYERS FL 33908

TITLE DS ☒ Delete
NAME LANGE, SHIRLEY C
STREET ADDRESS 6927 DOG LEG WAY
CITY-ST-ZIP FORT MYERS FL 33919

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DT ☒ Change ☐ Addition
NAME Lange, Shirley C
STREET ADDRESS 6927 Dog Leg Way
CITY-ST-ZIP Fort Myers, FL 33919

TITLE DS ☐ Change ☐ Addition
NAME O'Brien, Barbara
STREET ADDRESS 5776 Bass Cr.
CITY-ST-ZIP Fort Myers, FL 33919

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

SIGNATURE:

Shirley C. Lange

Shirley C. Lange Sec. 3-15-06 2394811972