

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738889

FILED
Jan 03, 2012
Secretary of State

Entity Name: LEHIGH COMMUNITY SERVICES, INC.

Current Principal Place of Business:

201 PLAZA DR
SUITE 103
LEHIGH ACRES, FL 33936 US

New Principal Place of Business:

Current Mailing Address:

201 PLAZA DRIVE
SUITE 103
LEHIGH ACRES, FL 33936 US

New Mailing Address:

FEI Number: 59-1773738

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICELY, CHARLOTTE R EXEC DIR
201 PLAZA DR
SUITE 103
LEHIGH ACRES, FL 33936 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: GOODLAD, TERESA
Address: 702 LEELAND HEIGHTS BLVD.
City-St-Zip: LEHIGH ACRES, FL 33936

Title: VP
Name: HUMFLEET, ALLEN
Address: 530 KELLER STREET
City-St-Zip: LEHIGH ACRES, FL 33974

Title: SEC
Name: CONRAD, KIM
Address: 213 ROOSEVELT AVE.
City-St-Zip: LEHIGH ACRES, FL 33936

Title: TRES
Name: GORDON, JOAN ADLER
Address: 1001 LOOP ROAD
City-St-Zip: LEHIGH ACRES, FL 33936

Title: DIR
Name: BUSSON, TERRY DR
Address: 2230 OXFORD RIDGE CIRCLE
City-St-Zip: LEHIGH ACRES, FL 33971

Title: DIR
Name: OLLIE, CONOVER
Address: 2405 DEL RAY PLACE
City-St-Zip: LEHIGH ACRES, FL 33972

I hereby 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 all other like empowered.

SIGNATURE: CHARLOTTE RAE NICELY

ED

01/03/2012

Electronic Signature of Signing Officer or Director

Date