2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2009
Secretary of State

DOCUMENT# 741380

Entity Name: LEHIGH ACRES COLUMBIAN HOME, INC.

Current Principal Place of Business:

2514 LEE BLVD.
LEHIGH ACRES, FL 33971 US

New Principal Place of Business:

1250 BUSINESS WAY
LEHIGH ACRES, FL 33936 US

Current Mailing Address:

P.O. BOX 641
LEHIGH ACRES, FL 33971 US

New Mailing Address:

FEI Number: 59-1807233 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, EDWARD A
2703 8TH ST. W
LEHIGH ACRES, FL 33971 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:	D	( ) Delete
Name:	ORZAPOWSKI, HENRY	
Address:	612 GRAND VIEW CT.	
City-St-Zip:	LEHIGH ACRES, FL 33936	
Title:	D	( ) Delete
Name:	GALANTE, VINCENT	
Address:	336 GARLAND CT.	
City-St-Zip:	LEHIGH ACRES, FL 33972	
Title:	D	( ) Delete
Name:	MCNULTY, JAMES	
Address:	10624 BAYTREE CT.	
City-St-Zip:	LEHIGH ACRES, FL 33936	
Title:	VP	( ) Delete
Name:	BESSE, DONALD	
Address:	211 MCARTHUR AVE.	
City-St-Zip:	LEHIGH ACRES, FL 33972	
Title:	P	( ) Delete
Name:	SMITH, EDWARD A	
Address:	2703 8TH ST. W	
City-St-Zip:	LEHIGH ACRES, FL 33971	
Title:	S	( ) Delete
Name:	MAGNO, CARL	
Address:	20004 LAKE VISTA CIRCLE	
City-St-Zip:	LEHIGH ACRES, FL 33936	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EDWARD A. SMITH PRES 01/27/2009
Electronic Signature of Signing Officer or Director — Date