

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **J76419**

1. Corporation Name

LEE MAC DEVELOPMENT, CORP.

Principal Place of Business

**2053 W. FIRST STREET
FT. MYERS FL 33901
US**

Mailing Address

**2053 W. FIRST S.
FT MYERS FL 33901
US**

2. Principal Place of Business

21
Suite, Apt. #, etc.

26 Mailing Address

27 Suite, Apt. #, etc.

22
City & State

23
Zip

28 City & State

29 Zip

24
Country

30 Country

9. Name and Address of Current Registered Agent

**MCINTYRE, BRUCE H.
2100 CLUBHOUSE ROAD
NORTH FORT MYERS FL 33903**

3. Date Incorporated or Qualified 06/08/1987	3a. Date of Last Report 03/08/1995
4. FEI Number 59-2813224	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

10. Name and Address of New Registered Agent

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

Block 10 Registered Agent signature required when reserving

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
C	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MCINTYRE, R.HART		1.2 NAME	
STREET ADDRESS 16105 FLAG POND LANE		1.3 STREET ADDRESS	
CITY-ST-ZIP N. FT. MYERS FL		1.4 CITY-ST-ZIP	
P	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MCINTYRE, BRUCE H.		2.2 NAME	
STREET ADDRESS 2100 CLUBHOUSE RD		2.3 STREET ADDRESS	
CITY-ST-ZIP N. FT. MYERS FL		2.4 CITY-ST-ZIP	
TS	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MCINTYRE, BECKY		3.2 NAME	
STREET ADDRESS 2100 CLUBHOUSE ROAD		3.3 STREET ADDRESS	
CITY-ST-ZIP N. FT MYERS FL		3.4 CITY-ST-ZIP	
V	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BIRR, ALLAN R.		4.2 NAME	
STREET ADDRESS 2168 CHANNEL WAY		4.3 STREET ADDRESS	
CITY-ST-ZIP N. FT MYERS FL		4.4 CITY-ST-ZIP	
	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 119.07(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Becky McIntyre
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Becky McIntyre

4/19/96

Daytime Phone #

CR2E034 (12/95)