2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L24856

Entity Name: LEE FP, INC.

FILED Mar 22, 2012 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

9800 S HEALTHPARK DR

SUITE 350

FT MYERS, FL 33908 US

Current Mailing Address: New Mailing Address:

9800 S HEALTHPARK DR SUITE 350

FT MYERS, FL 33908 US

FEI Number: 65-0184989 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DODSON, DOUGLAS A 9800 SOUTH HEALTHPARK DR SUITE 350 FORT MYERS, FL 33908 US

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:

Name: ADAMS, DANIEL F

Address: 2104 WEST FIRST STREET APT 2304

City-St-Zip: FORT MYERS, FL 33901

Title: VT

Name: CATTI, JOSEPH R
Address: 12681 CREEKSIDE LANE
City-St-Zip: FORT MYERS, FL 33919

Title: C

 Name:
 NOLAND, JOHN

 Address:
 1715 MONROE ST.

 City-St-Zip:
 FORT MYERS, FL 33902

Title: F

Name: DODSON, DOUGLAS A

Address: 9800 S HEALTH PARK DR STE 350

City-St-Zip: FORT MYERS, FL 33908

Title: [

Name: INGE, RONALD E
Address: 5571 HALIFAX AVENUE
City-St-Zip: FORT MYERS, FL 33912

Title: D

Name: ROEPSTORFF, ROBBIE

Address: 13000 SOUTH CLEVELAND AVENUE

City-St-Zip: FORT MYERS, FL 33907

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DOUGLAS A. DODSON PRES 03/22/2012