## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

## **Secretary of State** DOCUMENT # N00000008052 02-24-2006 90015 019 \*\*\*\*61.25 LEE'S PLACE, INC. Principal Place of Business Mailing Address 216 LAKE FLIA DRIVE 216 LAKE ELLA DRIVE 40017957 TALLAHASSEE, FL 32303 TALLAHASSEE, FL 32303 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02212006 Chg-NP CR2E037 (11/05) Applied For City & State City & State 4. FEI Number 59-3685124 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RABALAIS, BRENDA 436 AUDUBON DR Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE, FL 32312 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 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Due by May 1, 2006 Trust Fund Contribution. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE ☐ Delete TITLE Gail mcBride Change RABALAIS, BRENDA 3146 Fenwick court NAME NAME STREET ADDRESS 436 AUBUBON DR STREET ADDRESS CITY-ST-7IP Tallahussee, 7L 32309 CCTY-ST-7IP TALLAHASSEE, FL 32312 MLE Addition TITLE ☐ Delete miriam Watkins 3456 Exmouth Lane ☐ Change MALONEY, DAVID NAME STREET ADDRESS 2401 CHINABERRY LANE STREET ADDRESS Tallahassee, 7L 32317 CITY-ST-ZIP TALLAHASSEE, FL 32311 CITY-ST-ZIP Delete TITLE **Z** Addition Kimberley whetsel 2127 Golden Eugle Dr. West ANN. EVANS NAME NAME 1560 HICKORY AVENUE STREET ADDRESS STREET ADDRESS Tallahessee, 74 32312 TALLAHASSEE, FL 32303 CITY-ST-ZIP CITY-ST-7/P TITLE Delete TITLE Addition christy Harrison 2690 3. Hannon Hill Drive NAME CHENEY, LISA NAME STREET ADDRESS PO BOX 1639 STREET ADDRESS Tollahossee, 71 32309 CITY-ST-ZIP TALLAHASSEE, FL 32302 CITY-ST-ZIP Delete mr ☐ Change ■ Addition TITLE SNYDER, KRISTEN NAME NAME 271 JOHN HANCOCK DRIVE STREET ADORESS STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32312 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition KENN, MARTIN MAME NAME STREET ADDRESS 2326 HEATHROW DRIVE STREET ADDRESS TALLAHASSEE, FL 32312 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

FILED

Feb 24, 2006 8:00 am