

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000014

FILED
Apr 26, 2006
Secretary of State

Entity Name: LEE COUNTY 4-H FOUNDATION, INC.

Current Principal Place of Business:

3406 PALM BCH BLVD.
FT. MYERS, FL 33916

New Principal Place of Business:

3406 PALM BCH BLVD.
FT. MYERS, FL 33916 US

Current Mailing Address:

3406 PALM BCH BLVD.
FT. MYERS, FL 33916

New Mailing Address:

3406 PALM BCH BLVD.
FT. MYERS, FL 33916 US

FEI Number: 59-1830162

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARKWARD, MARY
3406 PALM BCH BLVD.
FT. MYERS, FL 33916 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: PD () Delete
Name: ROEDER, MIKE
Address: 2929 BONITA ST
City-St-Zip: FORT MYERS, FL 33901

Title: VD () Delete
Name: KALISZ, KAREN
Address: 3920 MICHIGAN AVE
City-St-Zip: FT MYERS, FL 33901

Title: SD () Delete
Name: KALISZ, KAREN
Address: 3920 MICHIGAN AVE
City-St-Zip: FT MYERS, FL 33901

Title: TD () Delete
Name: FEATHER, DOTTY
Address: 1714 SW 11TH AVE.
City-St-Zip: CAPE CORAL, FL 339913300

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROEDER, MIKE
Address: 2929 BONITA ST
City-St-Zip: FORT MYERS, FL 33901 US

Title: VD (X) Change () Addition
Name: SIBLEY, JOHN
Address: 108 2ND STREET
City-St-Zip: FT MYERS, FL 339072409 US

Title: SD (X) Change () Addition
Name: KALISZ, KAREN
Address: 9295 LENNEX LANE
City-St-Zip: FT MYERS, FL 33919 US

Title: TD (X) Change () Addition
Name: FEATHER, DOTTY
Address: 1714 SW 11TH AVE.
City-St-Zip: CAPE CORAL, FL 339913300 US

I hereby certify that the information supplied with this filing does not qualify for the 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: MIKE ROEDER

PD

04/26/2006

Electronic Signature of Signing Officer or Director

Date