

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 06, 2006 8:00 am**  
**Secretary of State**

02-06-2006 90076 019 \*\*\*\*70.00

**DOCUMENT # N01000001034**

1. Entity Name

UNITED VETERANS OF LEE COUNTY, INC.



Principal Place of Business

3691 EVANS AVE  
FT MYERS FL 33901

Mailing Address

P.O. BOX 147  
FORT MYERS FL 33902

2. Principal Place of Business

2358 Victoria Avenue

3. Mailing Address

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/05)



City & State

Fort Myers, FL 33901

City & State

33901-3816

County

Lee

Zip

Country

4. FEI Number

65-1080735

Applied For

Not Applicable

5. Certificate of Status Desired

XXX

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

OLDENBURG, VICTOR  
14157 CARIBBEAN BLVD  
FORT MYERS FL 33905

7. Name and Address of New Registered Agent

Name

Ralph D. Irons

Street Address (P.O. Box Number is Not Acceptable)

37 Galente Court

City

Fort Myers

FL

Zip Code

33912

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.

RALPH D. IRONS, DJA

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

23 JAN 2006

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE DPC  
NAME THIBODEAU, KENNETH B  
STREET ADDRESS P.O. BOX 147  
CITY-ST-ZIP FORT MYERS FL 33902 ☐ Delete

TITLE DVP  
NAME KAHLER, ROBERT  
STREET ADDRESS 2814 6TH ST., W  
CITY-ST-ZIP LEHIGH ACRES FL 33971 ☐ Delete

TITLE DVP  
NAME LEFKOWITZ, DAVID  
STREET ADDRESS 6300 SOUTH POINTE BLVD #111  
CITY-ST-ZIP FORT MYERS FL 33919 ☐ Delete

TITLE DS  
NAME BRIGHT, RICHARD  
STREET ADDRESS 2104 NW 7TH STREET  
CITY-ST-ZIP CAPE CORAL FL 33993 ☐ Delete

TITLE DT  
NAME OLDENBURG, VICTOR  
STREET ADDRESS 14157 CARRIBEAN BLVD  
CITY-ST-ZIP FORT MYERS FL 33905 ☐ Delete

TITLE DJA  
NAME KING, DAN  
STREET ADDRESS 5531 BURNHAM COURT  
CITY-ST-ZIP NORTH FORT MYERS FL 33903 ☒ Delete **DIED**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DJA  
NAME Irons, Ralph D.  
STREET ADDRESS 37 Galente Court  
CITY-ST-ZIP Fort Myers, FL 33912 ☒ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 file this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, my authorized like empowered.

**SIGNATURE:** REV. DR. KENNETH BOYD THIBODEAU, PDC

24 JAN 2006

(239) 418-0939