

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001908

FILED
Jul 22, 2008
Secretary of State

Entity Name: LEE COUNTY DEPUTY SHERIFF'S ASSOCIATION, INC.

Current Principal Place of Business:

12734 KENWOOD LANE #49
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

P.O. DRAWER 2736
FORT MYERS, FL 33902

New Mailing Address:

FEI Number: 73-1643163 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SMART, GERALD G
18520 TELEGRAPH CREEK LANE
ALVA, FL 33920 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: O'ROURKE, B. PAT
Address: 2180 WEST FIRST ST., STE. 306
City-St-Zip: FT. MYERS, FL 33901

Title: D () Delete
Name: WOOD, JAMES D
Address: 2472 FOWLER ST
City-St-Zip: FORT MYERS, FL 33901

Title: TD () Delete
Name: SMART, GERALD G
Address: 12734 KENWOOD LANE, STE. 49
City-St-Zip: FT. MYERS, FL 33907

Title: S () Delete
Name: CICONE, JOANN
Address: 3405 HANCOCK BRIDGE PARKWAY
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: D () Delete
Name: FAUST, JAYNE
Address: 8695 COLLEGE PKWY, STE 103
City-St-Zip: FORT MYERS, FL 33919

Title: V () Delete
Name: MERE, TOM
Address: 1555 NO. TAMIAMI TRAIL
City-St-Zip: NORTH FORT MYERS, FL 33903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: B. PAT O'ROURKE

PRES

07/22/2008

Electronic Signature of Signing Officer or Director

Date