

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010003

FILED
Apr 23, 2009
Secretary of State

Entity Name: LCHA, INC.

Current Principal Place of Business:

11831 BAYSHORE ROAD
NORTH FORT MYERS, FL 33917

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 314
FT. MYERS, FL 33902

New Mailing Address:

FEI Number: 59-2559362

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLINS, SCARLETT R
1116 NW 24TH AVE
CAPE CORAL, FL 33993 US

Name and Address of New Registered Agent:

HALL, JANE O
2813 SE 17TH AVENUE
CAPE CORAL, FL 33904 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: JANE O HALL

04/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KALIL, MICHAEL
Address: P.O. BOX 314
City-St-Zip: FT. MYERS, FL 33902

Title: VP () Delete
Name: JOHNSON, HELEN
Address: P.O. BOX 314
City-St-Zip: FT. MYERS, FL 33902

Title: S () Delete
Name: HALL, JANE
Address: P.O. BOX 314
City-St-Zip: FT. MYERS, FL 33902

Title: T () Delete
Name: COLLINS, SCARLETT
Address: P.O. BOX 314
City-St-Zip: FT. MYERS, FL 33902

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: HALL, JANE
Address: P.O. BOX 314
City-St-Zip: FT. MYERS, FL 33902

Title: S (X) Change () Addition
Name: SELLERS, ROBIN
Address: P.O. BOX 314
City-St-Zip: FT. MYERS, FL 33902

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: JANE O HALL

T

04/23/2009

Electronic Signature of Signing Officer or Director

Date