

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16745

FILED
Feb 24, 2011
Secretary of State

Entity Name: LEE COUNTY MEDICAL SOCIETY AUXILIARY, INC.

Current Principal Place of Business:

13300-56 S CLEVELAND AVE
112
FORT MYERS, FL 33907

New Principal Place of Business:

13770 PLANTATION ROAD
SUITE #1
FORT MYERS, FL 33912

Current Mailing Address:

13300-56 S CLEVELAND AVE
112
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 59-1766330

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZUCKER, SHERRI W TREASUR
13662 PINE VILLA LANE
FT. MYERS, FL 33912 US

Name and Address of New Registered Agent:

BOGGS, BRIDGETTE M TREASUR
15620 WILLOW OAK COURT
FT. MYERS, FL 33912 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: BRIDGETTE M BOGGS

02/24/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CO-P
Name: ANDERSON, MARIQUITA
Address: 17920 GREY HERON COURT
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: CO-P
Name: TRAIGER, TAMI
Address: 2627 SW 29TH AVENUE
City-St-Zip: CAPE CORAL, FL 33914

Title: SEC
Name: GREEN, ELAINE
Address: 16966 COLONY LAKES BOULEVARD
City-St-Zip: FORT MYERS, FL 33908

Title: TREA
Name: BOGGS, BRIDGETTE M
Address: 15620 WILLOW OAK COURT
City-St-Zip: FORT MYERS, FL 33912

I hereby 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 all other like empowered.

SIGNATURE: BRIDGETTE M BOGGS

TREA

02/24/2011

Electronic Signature of Signing Officer or Director

Date