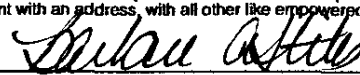


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90328 030 ****61.25

DOCUMENT # N32570 1. Entity Name NAMI LEE COUNTY, INC.					
Principal Place of Business 2789 ORTEZ AVE FORT MYERS, FL 33905 US			Mailing Address PO BOX 50816 FT MEYERS, FL 33994-0816 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		24046871 	
City & State Zip Country		City & State Zip Country		4. FEI Number 65-0122844 Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				01232004 Chg-NP CR2E037 (10/03)	
6. Name and Address of Current Registered Agent SMITH, FRED 8557 BRITANIA DR FORT MYERS, FL 33912			7. Name and Address of New Registered Agent Name BARBARA A. STITES Street Address (P.O. Box Number is Not Acceptable) 16590 Partridge PL #204 FT Myers 33908 City FL Zip Code		
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. SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. 4/13/04 DATE					
Filing Fee is \$61.25 Due by May 1, 2004		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WEDDLE, MARY LOU 6570 HIGHLAND PINES CIR. FT. MYERS, FL 33912	☒ Delete	TITLE PD NAME STREET ADDRESS CITY-ST-ZIP	Sharon Harris 23195 Coconut Shores Dr Bonita Springs FL 34134	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD TRAHIN, SHERRI 11 PALM BLVD LEHIGH ACRES, FL 33936	☒ Delete	TITLE VPD NAME STREET ADDRESS CITY-ST-ZIP	Edward Wells 4144 Country Club Blvd Cape Coral FL 33904	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SMITH, FRED 8557 BRITANIA DR FORT MYERS, FL 33912	☒ Delete	TITLE TD NAME STREET ADDRESS CITY-ST-ZIP	Barbara A. Stites 16590 Partridge PL #204 FT Myers FL 33908	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TEW, SUSAN H 15801 SONOMA DRIVE, #104 FORT MYERS, FL 33908	☒ Delete	TITLE SD NAME STREET ADDRESS CITY-ST-ZIP	Debra Lester 1120 Vesper Dr FT Myers FL 33901	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CSD QUINN, LORI ANN 330 OTTUAM AVE FORT MYERS, FL 33901	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 execute 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, with all other like empowered.					
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			4/13/04 Date 239-765-5400 Daytime Phone #		