2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Feb 07, 2007 8:00 am **Secretary of State** DOCUMENT # N44436 1. Entity Name 02-07-2007 90033 011 ****70.00 LEE COUNTY ARCHERS, INC. Principal Place of Business Mailing Address NALLE GRADE PARK P.O. BOX 1437 40010202 LEHIGH ACRES, FL 33970 N. FT MYERS, FL 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01192007 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number 65-0319972 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BROWN, ERNEST B III 660 ADDISON ST. EAST Street Address (P.O. Box Number is Not Acceptable) LEHIGH ACRES, FL 33936 City 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 NOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Due by May 1, 2007 Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. SD TITLE ☐ Delete TITLE ■ Addition Galatz, Ralph BRIGHT, PETER NAME NAME STREET ADDRESS 1428 NORTHWEST JUANITA PLACE STREET ADDRESS CITY-ST-ZIP CAPE CORAL, FL 33993 CITY-ST-ZIP Delete TITLE ☐ Change Addition VAN VOORHIS, TIM NAME NAME STREET ADDRESS **BOX 1053** STREET ADDRESS CITY-ST-7IP ALVA, FL 33920 CITY-ST-ZIP VD TITLE Detete □ Change TITLE ☐ Addition FELLER, JIMMY NAME NAME 660 Addison ST. East STREET ADDRESS 17582 JOHNSTOWN COURT STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33912 CITY-ST-ZIP TITLE DT ☐ Defete TITLE NAME MILLER, GREG NAME

FILED

☐ Addition

☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

**December 19, Florida Statutes and that my name appears in Block 10 or Block 11 if Sec. | Director

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Bright Peter 1428 Northwest Juanita Place

CITY-ST-ZIP

CITY-ST-ZIP

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TITLE

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NAME

7400 COLLEGE PARKWAY UNIT 61D

FORT MYERS, FL 33907

660 ADDISON ST. EAST

LEHIGH ACRES, FL 33936

BROWN, E.B. III

GALATZ, RALPH

3969 VILLMOUR LANE

FORT MYERS, FL 33919