

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44877

FILED
Apr 11, 2006
Secretary of State

Entity Name: LEE COUNTY HOUSING DEVELOPMENT CORPORATION

Current Principal Place of Business:

1288 N TAMiami TRL
FT. MYERS, FL 33903 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 2854
FORT MYERS, FL 33902 US

New Mailing Address:

FEI Number: 65-0295038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GILLIGAN, TREVA K.
1288 N TAMiami TRL
FT. MYERS, FL 33903 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: MERTON, BRUCE N DR
Address: 14581 BALD EAGLE DR
City-St-Zip: FORT MYERS, FL 33912 US

Title: VD () Delete
Name: FORD, LEE
Address: P.O. BOX 1268
City-St-Zip: FORT MYERS, FL 339021268 US

Title: STD () Delete
Name: KAREH, AHMAD R
Address: 4232 COUNTRY CLUB BLVD
City-St-Zip: CAPE CORAL, FL 33904 US

Title: D () Delete
Name: SUAREZ, ISRAEL DR
Address: PO BOX 1065
City-St-Zip: FORT MYERS, FL 339021065 US

Title: D () Delete
Name: REITMANN, MICHAEL
Address: 4210 METRO PKWY, STE 100
City-St-Zip: FORT MYERS, FL 33916 US

Title: D () Delete
Name: MICHAEL, ESPER
Address: 27200 RIVERVIEW CENTER BLVD. STE 200
City-St-Zip: BONITA SPRINGS, FL 34134 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: FORD, LEE
Address: 2959 BROADWAY
City-St-Zip: FORT MYERS, FL 33901 US

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

Title: D (X) Change () Addition
Name: GAIR, CHRIS
Address: 1373 SHADOW LANE
City-St-Zip: FORT MYERS, FL 33901 US

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 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: BRUCE N. MERTON

P

04/11/2006

Electronic Signature of Signing Officer or Director

Date