

**FILED**  
**Apr 14, 2008 08:00 A**  
**Secretary of State**

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

|                                                                                                                                                                                                                                                                                                                      |                                                                   |                                                                                                                           |                                                                                                  |                                                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| <b>DOCUMENT # N44877</b>                                                                                                                                                                                                                                                                                             |                                                                   |                                          |                                                                                                  |                                                                   |
| 1. Entity Name<br><b>LEE COUNTY HOUSING DEVELOPMENT CORPORATION</b>                                                                                                                                                                                                                                                  |                                                                   |                                                                                                                           |                                                                                                  |                                                                   |
| <table style="width: 100%;"><tr><td style="width: 50%; vertical-align: top;">Principal Place of Business<br/><b>3677 CENTRAL AVENUE<br/>SUITE F<br/>FT. MYERS, FL 33901 US</b></td><td style="width: 50%; vertical-align: top;">Mailing Address<br/><b>PO BOX 2854<br/>FORT MYERS, FL 33902 US</b></td></tr></table> |                                                                   |                                                                                                                           | Principal Place of Business<br><b>3677 CENTRAL AVENUE<br/>SUITE F<br/>FT. MYERS, FL 33901 US</b> | Mailing Address<br><b>PO BOX 2854<br/>FORT MYERS, FL 33902 US</b> |
| Principal Place of Business<br><b>3677 CENTRAL AVENUE<br/>SUITE F<br/>FT. MYERS, FL 33901 US</b>                                                                                                                                                                                                                     | Mailing Address<br><b>PO BOX 2854<br/>FORT MYERS, FL 33902 US</b> |                                                                                                                           |                                                                                                  |                                                                   |
| DO NOT WRITE IN THIS SPACE                                                                                                                                                                                                                                                                                           |                                                                   |                                                                                                                           |                                                                                                  |                                                                   |
| 6. Name and Address of Current Registered Agent                                                                                                                                                                                                                                                                      |                                                                   |                                                                                                                           |                                                                                                  |                                                                   |
| <b>GILLIGAN, TREVA K.<br/>3677 CENTRAL AVENUE<br/>SUITE F<br/>FT. MYERS, FL 33901</b>                                                                                                                                                                                                                                |                                                                   |                                                                                                                           |                                                                                                  |                                                                   |
| DO NOT WRITE IN THIS SPACE                                                                                                                                                                                                                                                                                           |                                                                   |                                                                                                                           |                                                                                                  |                                                                   |
| 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 _____<br><small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>                                                                                                                                          |                                                                   |                                                                                                                           |                                                                                                  |                                                                   |
| DATE _____                                                                                                                                                                                                                                                                                                           |                                                                   |                                                                                                                           |                                                                                                  |                                                                   |
| <b>Filing Fee is \$61.25<br/>Due by May 1, 2008</b>                                                                                                                                                                                                                                                                  |                                                                   | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be<br>Added to Fees |                                                                                                  |                                                                   |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                           |                                                                   | U000000838361<br>04/25/08-80086-001 70.00                                                                                 |                                                                                                  |                                                                   |
| TITLE                                                                                                                                                                                                                                                                                                                | PD                                                                |                                                                                                                           |                                                                                                  |                                                                   |
| NAME                                                                                                                                                                                                                                                                                                                 | MERTON, BRUCE N DR                                                |                                                                                                                           |                                                                                                  |                                                                   |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                       | 14581 BALD EAGLE DR                                               |                                                                                                                           |                                                                                                  |                                                                   |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                          | FORT MYERS, FL 33912                                              |                                                                                                                           |                                                                                                  |                                                                   |