2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47773

FILED Mar 23, 2009 Secretary of State

Entity Name: LEE COUNTY EXTENSION ADVISORY BOARD INC.

Current Principal Place of Business: New Principal Place of Business: 3406 PALM BEACH BLVD FT MYERS, FL 33916 US **Current Mailing Address: New Mailing Address:** 3406 PALM BEACH BLVD FT MYERS, FL 33916 FEI Number: 65-0333586 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HILL, CELIA B 3406 PALM BEACH BLVD FT MYERS, FL 33916 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SIBLEY, JOHN Name: Name: 108 2ND STREET Address: Address: City-St-Zip: FORT MYERS, FL 33907 US City-St-Zip: Title: () Delete Title: () Change () Addition ROEDER, MIKE Name: Name: Address: 2929 BONITA STREET Address: City-St-Zip: FORT MYERS, FL 33901 US City-St-Zip: Title: () Delete Title: () Change () Addition FORRESTER, TANYA Name: Name: 12751 NEW BRITTANY BLVD., SUITE 406 Address: Address: City-St-Zip: FORT MYERS, FL 33907 US City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: KALISZ, KAREN Name: 9295 LENNEX LANE Address: Address: City-St-Zip: FORT MYERS, FL 33919 US City-St-Zip: Title: () Delete Title: () Change () Addition CAWTHARD, JIM Name: Name: 41421 HORSHOE ROAD Address: Address: PUNTA GORDA, FL 33982 US City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition PRENTICE, ELAINE Name: Name: Address: 74 SHORELAND DRIVE Address: FORT MYERS, FL 33905 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CELIA B. HILL CED 03/23/2009