2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004
Secretary of State

DOCUMENT# N48596

Entity Name: LEE COUNTY EMPLOYMENT & ECONOMIC DEVELOPMENT CORPORATION

Current Principal Place of Business:

2774 FIRST STREET
FORT MYERS, FL 33916 US

New Principal Place of Business:

Current Mailing Address:

2774 FIRST STREET
FORT MYERS, FL 33916 US

New Mailing Address:

FEI Number: 65-0331857 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAPP, RICHARD
3275 SOUTH STREET
FT. MYERS, FL 33916 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:	CD	( ) Delete
Name:	SAPP, RICHARD	
Address:	3275 SOUTH STREET	
City-St-Zip:	FT. MYERS, FL 33916 US	
Title:	SD	( ) Delete
Name:	HUGHES, LOREEN	
Address:	2255 PAULDO ST	
City-St-Zip:	FORT MYERS, FL 33916 US	
Title:	VCD	( ) Delete
Name:	WELLS, LOVIE JR	
Address:	175 CONNECTICUT AVE	
City-St-Zip:	FORT MYERS, FL 33905 US	
Title:	TD	( ) Delete
Name:	FAIN, RICHARD	
Address:	13099 US 41 HWY SE	
City-St-Zip:	FORT MYERS, FL 33907 US	
Title:	D	( ) Delete
Name:	DOUGLAS, MATTIE	
Address:	23071 AVENUE B	
City-St-Zip:	ALVA, FL 33920 US	
Title:	D	( ) Delete
Name:	NEAL, ALICE	
Address:	23080 AVE B	
City-St-Zip:	ALVA, FL 33920 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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 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: RICHARD A. SAPP CHAI 04/29/2004

Electronic Signature of Signing Officer or Director — Date