2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50181

FILED Mar 24, 2008 Secretary of State

Entity Name: LEE CONLEE HOUSE, INC.

Current Principal Place of Business: New Principal Place of Business:

320 AZALEA PLAZA 2511 CRILL AVE

PALATKA, FL 32177 US PALATKA, FL 32177 US

Current Mailing Address: New Mailing Address:

P. O. BOX 2558

PALATKA, FL 32178 US

FEI Number: 59-3169443 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:

RIFFEY, SHANDRA L O'GRADY, BETH 117 DODGE ST. O'GRADY, BETH 1028 NE 11TH AVE

PALATKA, FL 32177 US GAINESVILLE, FL 32601 US

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: BETH O'GRADY 03/24/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

le: VP () Delete Title: P (X) Change () Addition

 Name:
 TINGLE, CAROLINE
 Name:
 TINGLE, CAROLINE

 Address:
 2509 FAIRWAY DR
 Address:
 2509 FAIRWAY DR

 City-St-Zip:
 PALATKA, FL 32177
 City-St-Zip:
 PALATKA, FL 32177

Title: P () Delete Title: VP (X) Change () Addition

 Name:
 DRIGGERS, BETSY
 Name:
 FULGHUM, MARSHALL

 Address:
 102 CANAL DR
 Address:
 922 SR 19 SOUTH

 City-St-Zip:
 EAST PALATKA, FL 32131
 City-St-Zip:
 PALATKA, FL 32177

Title: T () Delete Title: T (X) Change () Addition

 Name:
 FULGHUM, MARSHALL
 Name:
 RION, LEIGH

 Address:
 5111 CRILL AVE
 Address:
 233 CRYSTAL COVE DR

Address: 5111 CRILL AVE Address: 233 CRYSTAL COVE D
City-St-Zip: PALATKA, FL 32177 City-St-Zip: PALATKA, FL 32177

 $\label{eq:title:S} {\sf Title:S} \qquad \qquad {\sf S} \qquad {\sf (A) Change (A) Addition}$

 Name:
 RION, LEIGH
 Name:
 PARRIS, YVONNE

 Address:
 233 CRYSTAL COVE DR
 Address:
 121 CODY DR

 City-St-Zip:
 PALATKA, FL 32177
 City-St-Zip:
 SATSUMA, FL 32189

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: CAROLINE TINGLE P 03/24/2008