


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2004 08:00 AM
Secretary of State

DOCUMENT # N93000003852
 1. Entity Name
 LEE GUARDIANSHIP SERVICES, INC.



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| Principal Place of Business 3783 SEAGO LANE FORT MYERS, FL 33901 | Mailing Address 3783 SEAGO LANE FORT MYERS, FL 33901 |
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DO NOT WRITE IN THIS SPACE



03172004 No Chg-NP CR2E037 (10/03)

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|---|--------------------------------|
| 4. FEI Number 65-0432968 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent
 OSTERHOUT, JULIE
 3783 SEAGO LANE
 FORT MYERS, FL 33901

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning)

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

00000094121
 03/22/04-80045-015 61.25

10. OFFICERS AND DIRECTORS

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| TITLE NAME STREET ADDRESS CITY- ST- ZIP | PD OSTERHOUT, JULIE RT. 2, 134 POLLYWOG POINT LABELLE, FL 33935 |
| TITLE NAME STREET ADDRESS CITY- ST- ZIP | VD MCKINNEY, LANCE 7481 BEAR HOLLOW CIR FT MYERS, FL 33912 |
| TITLE NAME STREET ADDRESS CITY- ST- ZIP | SD PRATHER, BETH 1227 WALDEN DR FORT MYERS, FL 33901 |
| TITLE NAME STREET ADDRESS CITY- ST- ZIP | TD SWANK, BRITTON G 8905 ASHFORD GABLES COURT TAMPA, FL 33626 |
| TITLE NAME STREET ADDRESS CITY- ST- ZIP | |
| TITLE NAME STREET ADDRESS CITY- ST- ZIP | |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Julie Osterhout* 3-18-04 239-939-4888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #