

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000000755 (7)

1. Corporation Name

LEE BOULEVARD TRADE CENTER OWNERS' ASSOCIATION, INC.



Principal Place of Business

Mailing Address

**201 E JOEL BLVD
LEHIGH ACRES FL 33936**

**201 E JOEL BLVD
LEHIGH ACRES FL 33936**

3. Date Incorporated or Qualified

02/13/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 226 Joel Blvd

26 226 Joel Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Lehigh Acres FL 33936

28 Lehigh Acres FL 33936

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ALLISON, JANET
201 E JOEL BLVD
LEHIGH ACRES FL 33936**

81

Name

Janet Allison

82

Street Address (P.O. Box Number is Not Acceptable)

226 Joel Blvd

83

84

City

Lehigh Acres

FL

85

Zip Code

33936

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Janet Allison

January 30, 1996

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	FORTANA, JAMES G	
STREET ADDRESS	201 E JOEL BLVD	
CITY-ST-ZIP	LEHIGH ACRES FL 33936	
TITLE	VST	<input checked="" type="checkbox"/> DELETE
NAME	ADLER, JOAN F	
STREET ADDRESS	201 E JOEL BLVD	
CITY-ST-ZIP	LEHIGH ACRES FL 33936	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	ALLISON, JANET	
STREET ADDRESS	201 E JOEL BLVD	
CITY-ST-ZIP	LEHIGH ACRES FL 33936	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	Janet Allison	
13 STREET ADDRESS	226 E. Joel Blvd	
14 CITY-ST-ZIP	Lehigh Acres, FL 33936	
21 TITLE	VTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	John Natiello	
23 STREET ADDRESS	226 E. Joel Blvd	
24 CITY-ST-ZIP	Lehigh Acres, FL 33936	
31 TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	Sue Downs	
33 STREET ADDRESS	226 E. Joel Blvd	
34 CITY-ST-ZIP	Lehigh Acres, FL 33936	
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Janet Allison

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President 1/30/96 941-368-3229

Date

Daytime Phone #

CR2E037 (12/95)