

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000755

FILED
Mar 22, 2004
Secretary of State**Entity Name:** LEE BOULEVARD TRADE CENTER OWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**226 E JOEL BLVD.
LEHIGH ACRES, FL 33972 US**New Principal Place of Business:****Current Mailing Address:**226 E. JOEL BLVD.
LEHIGH ACRES, FL 33972 US**New Mailing Address:****FEI Number:** 65-0558899**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**NATIELLO, JOHN A
226 E JOEL BLVD
LEHIGH ACRES, FL 33972 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: VD () Delete
Name: NATIELLO, JOHN
Address: 226 E. JOEL BLVD.
City-St-Zip: LEHIGH ACRES, FL 33972

Title: PD () Delete
Name: DOWNS, SUEANNE N
Address: 226 E. JOEL BLVD.
City-St-Zip: LEHIGH ACRES, FL 33972

Title: VTD () Delete
Name: HORVATH, MARSE
Address: 226 E JOEL BLVD
City-St-Zip: LEHIGH ACRES, FL 33972

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVS (X) Change () Addition
Name: NATIELLO, JOHN
Address: 226 E. JOEL BLVD.
City-St-Zip: LEHIGH ACRES, FL 33972

Title: DP (X) Change () Addition
Name: GREEN, BRIAN D
Address: 1811 E. CAPE CORAL PARKWAY
City-St-Zip: CAPE CORAL, FL 33904

Title: DVT (X) Change () Addition
Name: HORVATH, MARGARET
Address: 226 E JOEL BLVD
City-St-Zip: LEHIGH ACRES, FL 33972

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: JOHN NATIELLO

DVS

03/22/2004

Electronic Signature of Signing Officer or Director

Date