

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006423

FILED
Jan 31, 2007
Secretary of State

Entity Name: LEE COUNTY COMMUNITY TENNIS ASSOCIATION, INC.

Current Principal Place of Business:

4575 VIA ROYALE
SUITE 218
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 101138
CAPE CORAL, FL 33910 US

New Mailing Address:

FEI Number: 65-0559114

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEAU, JOEL F
4575 VIA ROYALE
SUITE 218
FORT MYERS, FL 33919 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: PD () Delete
Name: CARTER, CECIL
Address: 10501 FGCU BLVD S
City-St-Zip: FORT MYERS, FL 33965 US

Title: SD () Delete
Name: WEISS, JOYCE
Address: 3410 PALM BEACH BLVD
City-St-Zip: FORT MYERS, FL 33916 US

Title: VD () Delete
Name: BOHANNON, HARRIETT
Address: 907 DEEP LAGOON LANE
City-St-Zip: FORT MYERS, FL 33919 US

Title: () Delete
Name:
Address:
City-St-Zip:

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: TD () Change (X) Addition
Name: TREASEH, RONALD L
Address: 4491 WINDJAMMER LANE
City-St-Zip: FORT MYERS, FL 33191

I hereby certify that the information supplied with this filing does not qualify for the 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: RONALD L TREASEH

TD

01/31/2007

Electronic Signature of Signing Officer or Director

Date