

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006812

Entity Name: FAST FORDS OF LEE COUNTY, INC.

FILED  
Jan 10, 2004  
Secretary of State

**Current Principal Place of Business:**

1417 SW 18TH TERRACE  
CAPE CORAL, FL 33991

**New Principal Place of Business:**

**Current Mailing Address:**

1417 SW 18TH TERRACE  
CAPE CORAL, FL 33991

**New Mailing Address:**

FEI Number: 65-0812503

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HECK, NED R  
1417 SW 18TH TERRACE  
CAPE CORAL, FL 33991

**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: SD ( ) Delete  
Name: GOUKER, PHYLLIS  
Address: 2929 SW 8TH CT.  
City-St-Zip: FT. MYERS, FL 33919

Title: T ( ) Delete  
Name: HECK, NED R  
Address: 1417 SW 18TH TERR  
City-St-Zip: CAPE CORAL, FL 33981

Title: PD ( ) Delete  
Name: TURNER, C IRVIN  
Address: 3820 SE 15TH PLACE  
City-St-Zip: CAPE CORAL, FL 33904

Title: VP ( ) Delete  
Name: LINDSAY, GREGORY  
Address: 66 CHEMSTRAND ST. E.  
City-St-Zip: LEHIGH ACRES, FL 33936

**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: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: NED R. HECK

T

01/10/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date