2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2008 8:00 am
Secretary of State
03-04-2008 90020 027 ****61.25

DOCUMENT # N99000004517

1. Entity Name
R.M. LEE COMMUNITY DEVELOPMENT CENTER, INC.

Principal Place of Business	Mailing Address
900 N. SEACREST BLVD. BOYNTON BCH, FL 33435	P.O. BOX 370 BOYNTON BEACH, FL 33425

DO NOT WRITE IN THIS SPACE

02132008 No Chg-NP CR2E037 (4/06)

4. FEI Number
65-0937804
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CHRISTOPHER, PLUMMER
150 KINGS WAY
ROYAL PALM BEACH, FL 33411

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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: Christopher Plummer C Plummer 2-21-08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BOLDON, JIM
STREET ADDRESS	879 WINDTREE WAY
CITY-ST-ZIP	WELLINGTON, FL 33414
TITLE	VP
NAME	FRANCES, FRANCES
STREET ADDRESS	900 SEACREST BOULEVARD
CITY-ST-ZIP	BOYNTON BEACH, FL 33426
TITLE	T
NAME	WATSON, LARRY
STREET ADDRESS	23 VALENCIA DRIVE
CITY-ST-ZIP	BOYNTON BEACH, FL 33436
TITLE	D
NAME	EDMONDS, ALEXANDER JR
STREET ADDRESS	6084 STRAWBERRY LAKES CIRCLE
CITY-ST-ZIP	LAKE WORTH, FL 33463
TITLE	D
NAME	HEATH, EARL
STREET ADDRESS	126 N. 6TH AVE.
CITY-ST-ZIP	BOYNTON BEACH, FL 33435
TITLE	D
NAME	ODOM, YVONNE
STREET ADDRESS	3905 LOWSON BLVD.
CITY-ST-ZIP	DELRAY BEACH, FL 33445

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Earl C Heath Jr EARL C. HEATH SR. 2/27/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #