

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000046582

Entity Name: LEE LAND DEVELOPMENT, INC.

FILED
Jul 08, 2008
Secretary of State

Current Principal Place of Business:

1120 HOMESTEAD RD
LEHIGH ACRES, FL 33936

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 1508
LEHIGH ACRES, FL 33970

New Mailing Address:

FEI Number: 04-3611151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHACHINGER, RUDOLF
1120 HOMESTEAD RD
LEHIGH ACRES, FL 33936 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LANDERTINGER, HERBERT
Address: P.O. BOX 1508
City-St-Zip: LEHIGH ACRES, FL 339701508

Title: D () Delete
Name: LANDERTINGER, BARBARA
Address: P.O. BOX 1508
City-St-Zip: LEHIGH ACRES, FL 339701508

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HERBERT LANDERTINGER

MR

07/08/2008

Electronic Signature of Signing Officer or Director

Date