

**2009 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Nov 11, 2009  
Secretary of State**

DOCUMENT# P02000088093

Entity Name: A.E.S OF LEE COUNTY, INC

**Current Principal Place of Business:**

3367 DANDOLA CIR.  
CAPE CORAL, FL 33909

**New Principal Place of Business:**

4610 22ND ST NE  
NAPLES, FL 34120

**Current Mailing Address:**

P.O. BOX 368017  
BONITA SPRINGS, FL 34136

**New Mailing Address:**

4610 22ND ST NE  
NAPLES, FL 34120

FEI Number: 59-3707534      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

EDWARDS, DIAN M  
1842-B 40TH TERR SW  
NAPLES, FL 34116    US

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

SIERRA, ABEL M  
4610 22ND ST NE  
NAPLES, FL 34120    US

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: ABEL SIERRA      11/11/2009  
\_\_\_\_\_  
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:            S            ( ) Delete  
Name:            SIERRA, ABEL  
Address:        25751 CORZINE RD  
City-St-Zip:    BONITA SPRINGS, FL 34135

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:            S            (X) Change ( ) Addition  
Name:            SIERRA, ABEL  
Address:        4610 22ND ST NE  
City-St-Zip:    NAPLES, FL 34120

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: ABEL SIERRA      PRES      11/11/2009  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date