2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2009
Secretary of State

DOCUMENT# P03000138344

Entity Name: OUT-N-OUT OF LEE COUNTY, INC.

Current Principal Place of Business:

17264 SAN CARLOS BLVD
#302
FORT MYERS BEACH, FL 33931

New Principal Place of Business:

Current Mailing Address:

17264 SAN CARLOS BLVD
#302
FORT MYERS BEACH, FL 33931

New Mailing Address:

FEI Number: 20-0433593 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FELLOWS, CYNTHIA B
18781 CREEKBRIDGE CT.
ALVA, FL 33920 US

Name and Address of New Registered Agent:

KLONOWSKI, LORIE A
20770 GROVELINE COURT
ESTERO, FL 33928 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: LORIE A. KLONOWSKI 04/20/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DVP ( ) Delete
Name: FELLOWS, CYNTHIA B
Address: 18781 CREEKBRIDGE CT.
City-St-Zip: ALVA, FL 33920

Title: DP (X) Delete
Name: FELLOWS, GARY A
Address: 18781 CREEKBRIDGE CT.
City-St-Zip: ALVA, FL 33920

Title: DS (X) Delete
Name: KLONOWSKI, LORIE
Address: 20770 GROVELINE COURT
City-St-Zip: ESTERO, FL 33928

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: KLONOWSKI, LORIE A
Address: 20770 GROVELINE COURT
City-St-Zip: ESTERO, FL 33928

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: LORIE KLONOWSKI DP 04/20/2009
Electronic Signature of Signing Officer or Director Date