2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000146974

1. Entity Name

LEE COMMERCIAL INVESTORS, INC.



Principal Place of Business

Mailing Address

800 W. CYPRESS CREEK ROAD SUITE 465

FT. LAUDERDALE, FL 33309

800 W. CYPRESS CREEK ROAD SUITE 465 FT. LAUDERDALE, FL 33309 FILED
May 03, 2007 08:00 AM
Secretary of State



DO NOT WRITE IN THIS SPACE

01152007 No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3825092

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEGEL, LARRY 800 W. CYPRESS CREEK ROAD SUITE 470 FT. LAUDERDALE, FL 33309

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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.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be Added to Fees

10.	OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STERLACCI, JOSEPH 14130 DUKE WAY ALVA, FL 33920
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS REYNAERT, JEROME P O BOX 1059 ALVA, FL 33920
TITLE NAME STREET ADDRESS CITY - ST-ZIP	AS LEGEL, LARRY 800 W. CYPRESS CREEK RD., SUITE 470 FORT LAUDERDALE, FL 33309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-74P	

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12. Thereby 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 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if chapted or on an attachment with an address with all other like empowered.

SIGNATURE:

BIGNATURE AND TYPES OR PRINTED NAME OF BIGNING OFFICER OR DIRECTO

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