

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000004801

FILED  
Apr 02, 2008  
Secretary of State

Entity Name: MERECAPA OF LEE COUNTY, INC.

## Current Principal Place of Business:

1318 LAFAYETTE ST.  
CAPE CORAL, FL 33904

## New Principal Place of Business:

1456 VENDEMOME CT  
CAPE CORAL, FL 33904

## Current Mailing Address:

1318 LAFAYETTE ST.  
CAPE CORAL, FL 33904

## New Mailing Address:

1456 VENDEMOME CT  
CAPE CORAL, FL 33904

FEI Number: 65-0325630

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HILL, THOMAS W  
1318 LAFAYETTE ST.  
CAPE CORAL, FL 33904 US

## Name and Address of New Registered Agent:

HERITAGE TAX & CONSULTING SERVICES INC  
11220 METRO PARKWAY .  
#3  
CAPE CORAL, FL 33966 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: DAVID GOLDBERG, PRES

04/02/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HILL, THOMAS W  
Address: 1318 LAFAYETTE ST.  
City-St-Zip: CAPE CORAL, FL 33904

Title: D ( ) Delete  
Name: SEGIET, ALFRED  
Address: 1318 LAFAYETTE ST.  
City-St-Zip: CAPE CORAL, FL 33904

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SEGIET, ROMY  
Address: 1456 VENDOME CT  
City-St-Zip: CAPE CORAL, FL 33904

Title: D (X) Change ( ) Addition  
Name: SEGIET, ALFRED  
Address: 1456 VENDOME CT  
City-St-Zip: CAPE CORAL, FL 33904

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: ALFRED SEGIET

D

04/02/2008

Electronic Signature of Signing Officer or Director

Date