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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

P95000084279 (5) **DOCUMENT #**

1. Corporation Name LEE CORPORATION

Principal Place of	of Business	Maling Address		I INDIVINDE AID IDIDA DIAIN BUIN DUNA DEA	1 30 161 30 101 1 0 141 31010 11011 11	JUIO 1314 (03)
3011 CEITUS PARKWAY CAPE CORAL FL 33991		3011 CEITUS PARKWAY CAPE CORAL FL 33991				
				3. Date Incorporated or Qualified 10/30/1995	3a. Date of Last Rep	nort
2. Principal Plac	ce of Business	2a. Mairing Address		4. FEI Number	Ar	pplied For
21		26				ot Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc. 27		5. Certificate of Status Desired	Fee Re	Additional equired
City & State		City & State		Election Campaign Financing Trust Fund Contribution		May Be to Fees
23 Zip	Country	28	Country	8. This corporation has liability for		
24]	25	29	30		No	00.002,
-	9. Name and Address of Curre			10. Name and Address of New I	Registered Agent	
			81 Name			
	n, ernest a		82 Street A	ddress (P.O. Box Number is Not Acceptal	ble)	
, 4729 DEI						
CAPE CORAL FL 33904			83			
7 .			84 City		 85 Zip	Code
. (poration submits this statement for the pu	<u> </u>	
or registere familiar with SIGNATURE.	d agent, or both, in the State of Fic i, and accept the obligations of, Se	rida. Such change was authoriz ctior: 607,0505, Florida Statutes	zed by the corporation sit	oard of directors. I hereby accept the app	pointment as registered a	igent. I am
12.	ignature, typed or printed name of registered age OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OF		R\$ IN 12
TITLE	D	☐ DELETE	1 1 T ILE		☐ Change	Addition
NAME .	HEINZ, NORBERT A		1.2 NAME			
STREET ADDRESS	AM LANGEN BERG 5		1.3 STREET ADDRESS			
CITY - ST - Z P	D-63654 BUEDINGEN, GER	MANY	L4 CiTY-ST-ZiP			·
TITLE		DELETE	2 1 TITLE		☐ Change	Addition
NAME			2 2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-Z-P			2.4 CH.Y - ST - 71°		Change	Addition
TITLE		DELETE.	3 1 TITLE		☐ Change	☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS		•	
CITY - ST - ZiP TITLE		DELETE	3.4 CHY+\$1+ZIF 4.1 THE		Change	Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
City-SI-ZIP			4.4.0/TY - ST - ZIP			
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STREET AD DRESS			\$ 3 STREET ADDRESS			
CITY - ST - ZIP			5.4 CP Y - S11 ZP			
TITLE		☐ DELETE	6 tTHLF	1000017 -04/11/9601	772 6 4mg	Addition
NAME			6.2 NAME. ,	04/11/9601	103008	C . –
STREET AD TRESS			€ 3 STHEFT ADDRESS	. ***200.00		1. Ob.
CITY-ST-ZIP			€ 4 CITY - ST - ZIP	f fo the consistent of the discourse and	0.07/0/dd Elecido Stat to	JIN/
14. I do hereby cert fy that oath; that I appears in	r certify that the information suriplie the information indicated on this ar am an officer or director of the co- Block 12 or Block 13 if changes, c	u win mis ning is voluntarily for inual report or supplemental an poranion or the secriver or trust ir on an attackinent with an add	maries and does hist gual nual report is true and acc ed empowered to executa iress	ly for the exemption stated in Section 115 circle and that my signature shall have the this report as required by Chapter 607, f	e same legal effect as if i	niae und

SIGNATURE: _

SIGNATURE AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-11-1996 941-283/3763