

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000088058

Entity Name: LEE CO FUNDING, INC.

FILED  
May 22, 2008  
Secretary of State

## Current Principal Place of Business:

12453 S CLEVELAND AVE  
FORT MYERS, FL 33907 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 60115  
FORT MYERS, FL 339076115 US

## New Mailing Address:

FEI Number: 65-0787663

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SOOM, PETER W  
12453 S CLEVELAND AVE  
FT. MYERS, FL 33907 US

## Name and Address of New Registered Agent:

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:

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: PD ( ) Delete  
Name: SOOM, PETER W  
Address: 12453 S CLEVELAND AVE  
City-St-Zip: FT MYERS, FL 33907 US

Title: STD ( ) Delete  
Name: LEACH, ELISA A  
Address: 15412 BRIARCREST CIR  
City-St-Zip: FT MYERS, FL 33912 US

Title: VPD ( ) Delete  
Name: MARSHMAN, DAVID T  
Address: 12453 S CLEVELAND AVE  
City-St-Zip: FT MYERS, FL 33907 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: PETER W SOOM

PD

05/22/2008

Electronic Signature of Signing Officer or Director

Date