## 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008237

Entity Name: LEHIGH ACRES CHAMBER FOUNDATION, INC.

**FILED** Feb 23, 2021 **Secretary of State** 1026924006CC

## **Current Principal Place of Business:**

25 HOMESTEAD RD N

STE # 41

LEHIGH ACRES, FL 33936

## **Current Mailing Address:**

P.O. BOX 757

LEHIGH ACRES, FL 33970

FEI Number: 26-0752965 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DEETSCREEK, DAVID 25 HOMESTEAD RD N STE # 41

LEHIGH ACRES, FL 33936 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 DEETSCREEK 02/23/2021

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **TREASURER** Title VC

DEETSCREEK, DAVID Name Name KATYNA, HOOVER

25 HOMESTEAD RD N 2802 LEE BOULDEVARD # 2 Address Address

City-State-Zip: LEHIGH ACRES FL 33971 City-State-Zip: LEHIGH ACRES FL 33936

Title **CHAIRMAN** 

Title **PAST CHAIRMAN** Name WELCH, MICHAEL J

Name MOORE, ED 25 HOMESTEAD RD N Address

13650 FIDDLESTICKS BLVD

STE 202-145 City-State-Zip:

LEHIGH ACRES FL 33936 City-State-Zip: FORT MYERS FL 33912

Title **SECRETARY** 

Address

Name WILLIAMSON, NANCY

Address P.O. BOX 757

City-State-Zip: LEHIGH ACRES FL 33970

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

02/23/2021 SIGNATURE: MICHAEL J WELCH **CHAIRMAN**