

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007434

Entity Name: LEMON BAY HIGH SCHOOL PROJECT GRADUATION, INC.

Current Principal Place of Business:

386 FIRETHORN AVE.
ENGLEWOOD, FL 34223

Current Mailing Address:

POST OFFICE BOX 191
ENGLEWOOD, FL 34295

FEI Number: 26-3221697

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BENEDICT, ROBERT C
1861 PLACIDA ROAD
SUITE 204
ENGLEWOOD, FL 34223-4949 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name ZEE, PAMELA
Address 9251 BELGRADE TERRACE
City-State-Zip: ENGLEWOOD FL 34224

Title VP
Name DIAGIACOMO, CINDY
Address 13592 BOATBILL LANE
City-State-Zip: PORT CHARLOTTE FL 33981

Title SECRETARY
Name GUTIERREZ, GIA
Address 600 PALOMINO TRAIL
City-State-Zip: ENGLEWOOD FL 34223

Title TREASURER
Name HARRISON, ELIZABETH M
Address 386 FIRETHORN AVE.
City-State-Zip: ENGLEWOOD FL 34223

Title DIRECTOR
Name HICKS, HOLLI
Address 12132 DIVERSEY AVE.
City-State-Zip: PT. CHARLOTTE FL 33981

Title DIRECTOR
Name GUTIERREZ, GIA
Address 600 PALOMINO TR.
City-State-Zip: ENGLEWOOD FL 34223

Title DIRECTOR
Name AUMAN, BRUCE
Address 128 MARK TWAIN LANE
City-State-Zip: ROTONDA WEST FL 33947

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.

SIGNATURE: ELIZABETH M. HARRISON

TREASURER

02/26/2014

Electronic Signature of Signing Officer/Director Detail

Date