

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12612

Entity Name: THE FOUNDATION FOR LEE COUNTY PUBLIC SCHOOLS, INC.**Current Principal Place of Business:**2266 SECOND STREET
FT. MYERS, FL 33901**Current Mailing Address:**P.O. BOX 1608
FT. MYERS, FL 33902**FEI Number:** 59-2637849**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BOWER, MARSHALL T ESQ.
2266 SECOND STREET
FORT MYERS, FL 33901 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:** MARSHALL T. BOWER, ESQ.

01/11/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title IMMEDIATE PAST CHAIR
Name CECIL, JON
Address LEE HEALTH
636 DEL PRADO BLVD
City-State-Zip: CAPE CORAL FL 33990

Title CHAIRMAN
Name GRIFFIN, GARY
Address B & I CONTRACTORS, INC.
2701 PRINCE ST
City-State-Zip: FORT MYERS FL 33916

Title VC
Name HAAS, KATIE
Address BOSTON RED SOX
JETBLUE PARK 11500 FENWAY
SOUTH DRIVE
City-State-Zip: FORT MYERS FL 33913

Title PRESIDENT & CEO
Name BOWER, MARSHALL T ESQ.
Address 2266 SECOND STREET
City-State-Zip: FORT MYERS FL 33901

Title TREASURER
Name ROMINE, JONATHAN L
Address ENSITE, INC.
2401 FIRST STREET STE. 201
City-State-Zip: FORT MYERS FL 33901

Title SECRETARY
Name GERGLEY, DENISE
Address CHICO'S FAS, INC.
11215 METRO PKWY
City-State-Zip: FORT MYERS FL 33966

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: MARSHALL T. BOWER, ESQ.

PRESIDENT & CEO

01/11/2018

Electronic Signature of Signing Officer/Director Detail

Date