

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32570

Entity Name: NAMI LEE COUNTY, INC.**Current Principal Place of Business:**6831 PALISADES PARK COURT
SUITE 6
FORT MYERS, FL 33912**Current Mailing Address:**PO BOX 50816
FORT MYERS, FL 33994 US**FEI Number:** 65-0122844**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**KRATT, DIANE
11430 HEIDI LEE LANE
FORT MYERS, FL 33908 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:** DIANE KRATT

03/14/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRES
Name	KRATT, DIANE
Address	11430 HEIDI LEE LANE
City-State-Zip:	FORT MYERS FL 33908

Title	VP
Name	GODFREY, CHARITY A
Address	3754 LAKE ST.
City-State-Zip:	FORT MYERS FL 33901

Title	DIR
Name	GARABEDIAN STORK, MICHELE
Address	8542 MANDERSTON COURT
City-State-Zip:	FORT MYERS FL 33912

Title	EXDR
Name	SAGER, KATHLEEN L
Address	6831 PALISADES PARK COURT STE 6
City-State-Zip:	FORT MYERS FL 33912

Title	TREASURER
Name	YONTZ-ORLANDO, JENNIFER
Address	12200 CANNON LANE
City-State-Zip:	FORT MYERS FL 33912

Title	DIR
Name	BOISVERT, ROSEMARY A
Address	21 NW 14TH AVE.
City-State-Zip:	CAPE CORAL FL 33993

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: KATHLEEN SAGER**EXECUTIVE DIRECTOR**

03/14/2013

Electronic Signature of Signing Officer/Director Detail

Date