Lee County Board Of County Commissioners Agenda Item Summary

Blue Sheet No. 20070389

- 1. ACTION REQUESTED/PURPOSE: Meet as the Board of Directors of the Lee County Governmental Leasing Corporation to hold its Annual Meeting and approve the 2007 Annual Report in accordance with Chapter 617, Florida Statutes.
- 2. FUNDING SOURCE: None
- **3. WHAT ACTION ACCOMPLISHES**: Maintains non-profit corporate status.
- **4. MANAGEMENT RECOMMENDATION:** Approve the 2007 Annual Report of the Lee County Governmental Leasing Corporation.

5. Departmental Category: A12A				6. Meeting Date: April 3, 2007		
7. Agenda:	8. Rec	uirement/Purp	ose: (specify)	9. Request Initiated:		
Consent	X	Statute	CH. 617, F.S.	Commissioner		
X Administrative		Ordinance		Department	County Attorney	
Appeals		Admin. Code		Division		
Public	X	Other	Fla. Bar	By:	David M. Owen	
			Rules		County Attorney	
Walk-On		-			7 hall	
10. Background:				7	13.	

-

To maintain its corporate status, the Lee County Governmental Leasing Corporation, a corporation not-for-profit, pursuant to Chapter 617, Florida Statutes, must hold its annual meeting and approve for filing with the Secretary of State the corporation's 2007 Annual Report. Minutes of the corporate meeting held on April 25, 2006 are attached.

11. Rev	iew for Sch	eduling:					
Dept. Director	Purchasing or Contracts	Human Resources	Other	County Attorney	Budget Services		County Manager/P.W. Director
			(T	ممنا	RX 319 My no 6 3 40	Mgr/	1 matter
12. Coi	nmission AApprovDeferreDeniedOther	ed		3/19/07	RECEIVED BY COUNTY ADMIN. 3 3:45 M.C. AND STY ADMIN.	CO. ATTY FORMARDEI JO CO. AI	B (9/27) MIN. 11:50P
					FORWARDED TO: 11		

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N37978 1. Entity Name LEE COUNTY GOVERNMENTAL LEASING CORPORATION Principal Place of Business Mailing Address % JAMES G. YAEGER % JAMES G. YAEGER 2115 2ND ST. 2115 2ND ST. FT. MYERS, FL 33901 FT. MYERS, FL 33901 3. Mailing Address 2. Principal Place of Business - No P.O. Box # 2115 2ND ST. 2115 2ND ST Suite, Apt. #, etc. Suite, Apt. #, etc. 03132007 Chg-NP CR2E037 (12/06) 6TH FLOOR 6TH FLOOR City & State 4. FEI Number Applied For City & State 65-0194072 Not Applicable FT. MYERS, FI FT. MYERS, FL Country Country \$8.75 Additional Zip 5. Certificate of Status Desired 33901 USA 33901 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name OWEN, DAVID M Street Address (P.O. Box Number is Not Acceptable) 2115 2ND ST. FT. MYERS, FL 33901 City Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent David M. Owen, County Attorney SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. PD D TITLE **XX**Change ☐ Addition TITLE ☐ Delete JANES, ROBERT NAME NAME Robert Janes 2120 MAIN ST. STREET ADDRESS STREET ADDRESS 2120 MAIN ST. FT. MYERS, FL CITY-ST-ZIP FT. MYERS, FL 33901 CITY-ST-7IP 33901 VD ☐ Addition D **XX**Change TITLE ☐ Delete TITLE JUDAH RAY NAME NAME RAY JUDAH STREET ADDRESS 2120 MAIN ST. STREET ADDRESS 2120 MAIN ST. CITY-ST-71F FT. MYERS, FL 33901 CITY-ST-ZIP FT. MYERS, FL 33901 VD TITLE D XX.Change ☐ Addition TITLE ☐ Delete NAME HALL, TAMMY NAME TAMMY HALL 2120 MAIN ST. STREET ADDRESS 2120 MAIN ST. STREET ADDRESS FT. MYERS, FL 33901 CITY-ST-ZIP FT. MYERS, FL 33901 CITY-ST-7IP ☐ Change XIX Addition XX Delete TITLE TITLE ALBION, JOHN FRANK MANN NAME NAME STREET ADDRESS 2120 MAIN ST. STREET ADDRESS 2120 MAIN ST. CITY-ST-ZIP CITY-ST-ZIP FT. MYERS, FL 33901 FT. MYERS, FL 33901 XX Delete ☐ Change XX Addition TITLE TITLE ST CERNY, DOUGLAS R NAME NAME BRIAN BIGELOW STREET ADDRESS 2120 MAIN ST. STREET ADDRESS 2120 MAIN ST. CITY-ST-ZIP FT. MYERS. FL 33901 CITY-ST-ZIP FT. MYERS, FL 33901 ST ☐ Change ☐ Addition TITLE ☐ Delete TITLE STILWELL, DONALD D NAME Donald D. Stilwell NAME STREET ADDRESS 2115 SECOND STREET STREET ADDRESS 2115 SECOND ST. CITY-ST-7IP CITY-ST-ZIP FT MYERS, FL 33901 FT. MYERS, FL 33901 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if

SIGNATURE:

Robert P. Janes (239) 335-2111

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daylime Phone #

changed, or on an attachment with an address, with all other like empowered

IMPORTANT INSTRUCTIONS

Pursuant to Chapter 496, Florida Statutes, charitable solicitation organizations/sponsors must annually register with the Department of Agriculture, Division of Consumer Services, Room 208A Mayo Building, Tallahassee, Florida 32399-0800. Failure to comply is a third degree felony.

Call 850-488-2221 or 800-435-4352 (within Florida only) for more information.

- Make check payable to Florida Department of State.
- Check must be payable in US Funds and through a US Bank.
- Submit report with a separate check for each filing.
- Changes must be typed or printed in ink and legible.

- Sign report in block 12.
 - * The fee to file the not-for-profit annual report is \$61.25. If a certificate of status is desired, please add an additional \$8.75. Only one certificate may be requested.

- Block 1. Block 1 is preprinted with the name, document number, mailing address and principal place of business as last reported to our office. You cannot change the name on this form. You must file an amendment to change the name. For amendment information, call (850) 245-6050, or download forms at www.sunbiz.org.
- Block 2 & 3. If the principal place of business address in Block 1 is incorrect, enter the correct address in Block 2. A Post Office Box cannot be used for the Principal address. If the preprinted mailing address in Block 1 is incorrect, enter the new mailing address in Block 3. A Post Office Box is acceptable for the mailing address.
- Block 4. If blank, complete Block 4 by entering your Federal Employer Identification (FEI) number or checking either applied for or not applicable. FEI numbers are not assigned by the Division of Corporations. For assistance with FEI numbers, call the IRS at (800) 829-4933.
- Block 5. Should you desire a certificate reflecting your entity's status after the filing of this report, check the BOX in Block 5 and include an additional \$8.75 with your filing fee. Only one certificate can be issued at the time of the report filing.
- Block 6. The law requires that each entity have a Registered Agent with a **Florida street address**. If the information in Block 6 is incorrect, enter the correct information in Block 7. There is no additional fee to change the Registered Agent on this form.
- Block 7. If a new Registered Agent has been appointed, enter the new agent's name and/or address in box 7. This must be a **Florida Street address.** A P.O. Box is NOT acceptable for service of process. A CORPORATION CANNOT SERVE AS ITS OWN REGISTERED AGENT; however, a principal of the corporation can.
- Block 8. The new Registered Agent must accept the obligations and this appointment by completing and signing in Block 8. No signature is necessary if the same Registered Agent is retained. If the Registered Agent is a different entity, the person signing must state their position with the entity. **NOTE: Registered agent signature required when reinstating on this form.**
- Block 9. Florida law allows for a voluntary contribution of \$5.00 per taxpayer for the purpose of providing for public financing of political campaigns for the offices of the Governor and members of the Cabinet. If you would like to contribute, check the box in Block 9 and include an additional \$5.00 with the filing fee.
- Block 10. Block 10 contains the officers/directors last reported to our office. If blank, you must list the name and address of all officers/directors in Block 11. Please do not make any marks in Block 10 unless deleting an officer; corrections or additions are to be made in Block 11.
- Block 11. Block 11 is for changes or additions to the existing Officers/Directors in Block 10. Changes must be typed or printed and legible. List all officers/directors. Attach a separate sheet if necessary. Use the following type symbols on the title line: P=President; V=Vice President; T=Treasurer; S=Secretary; D=Director; C=Chairman; M=Managing Director. If a person holds more than one position, enter all positions, e.g., S/D; V/S; V/T/D. A FLORIDA NON-PROFIT CORPORATION IS REQUIRED TO MAINTAIN AT LEAST 3 DIRECTORS OR TRUSTES. THE LETTER "D" OR "T" SHOULD BE PLACED BY THE NAME OF EACH DIRECTOR. NOTE: A DIRECTOR MUST BE A NATURAL PERSON 18 YEARS OF AGE OR OLDER. NOTE: If officer or director's address is confidential pursuant to Chapter 119, Florida Statutes, an alternate address must be provided. Officers/Directors must provide an address. Florida Statutes require a physical address be given. The provision of a post office box in Block 10, 11 or on an attachment is an affirmation under oath that no other address is available.
- Block 12. This report must be signed in Block 12 with an original signature by an officer/director of the entity that is listed in Block 10, Block 11 if a change, or on an attachment with a street address. If the entity is in the hands of a receiver, it must be signed by the trustee or receiver. A signature placed on an attachment in lieu of placement in Block 12 is unacceptable.

Mail completed report to:

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500 Courier Address (overnight delivery)
Division of Corporations
2670 Executive Center Circle
Suite 100
Tallahassee, FL 32301

Questions?

Phone: (850) 245-6056 Hearing/Voice Impaired may call (850) 245-6096 (TDD)

INFORMATION REGARDING RETURNED CHECK

If the check submitted with this report is returned by a bank for any reason, the report will be cancelled and considered not filed. The Department of State will dissolve/revoke the entity if a replacement payment with service charge and report are not resubmitted within the prescribed time frame.

שממס	20051	LEASING	CODDOD	A THOSE
BUUK :	· 20051	LEASING	CURPUR	A LIUN

---PAGE:

FEBRUARY 15, 2005

A Meeting of the <u>Lee County Governmental Leasing Corporation</u> was held this date with the following Commissioners present:

Douglas R. St. Cerny, President Tammy Hall, Vice-President Ray Judah John E. Albion Robert P. Janes

The President called the meeting to order at 10:30 a.m.

ADMINISTRATIVE AGENDA

12. <u>COUNTY ATTORNEY</u>

(a) ACTION REQUESTED:

Meet as Board of Directors of the Lee County Governmental Leasing Corporation to hold Annual Meeting; approve 2005 Annual Report; and approve the Minutes of February 3, 2004 and March 9, 2004

WHY ACTION IS NECESSARY:

To meet requirements of Florida Statute 617.

WHAT ACTION ACCOMPLISHES:

Maintains non-profit corporate status. (#20050029-County Attorney)

Commissioner Janes moved approval, seconded by Commissioner Albion, called and carried.

The President adjourned the meeting at 10:33 a.m.

ATTEST: CHARLIE GREEN, CLERK

Deputy Clerk

President, Lee County
Governmental Leasing Corporation

-----DRAFT MINUTES OF 021505L----