

**Lee County Board of County Commissioners  
Agenda Item Summary**

Blue Sheet No. 20050029

**1. REQUESTED MOTION:**

**ACTION REQUESTED:** Meet as Board of Directors of the Lee County Governmental Leasing Corporation to hold Annual Meeting and approve 2005 Annual Report.

**WHY ACTION IS NECESSARY:** To meet requirements of Florida Statute 617.

**WHAT ACTION ACCOMPLISHES:** Maintains non-profit corporate status.

**2. DEPARTMENTAL CATEGORY:**  
COMMISSION DISTRICT #

*A12A*

**3. MEETING DATE:**

*02-15-2005*

**4. AGENDA:**

- CONSENT
- ADMINISTRATIVE
- APPEALS
- PUBLIC
- WALK ON
- TIME REQUIRED:

**5. REQUIREMENT/PURPOSE:**  
(Specify)

- STATUTE F.S. 617
- ORDINANCE
- ADMIN. CODE
- OTHER Florida Bar Rules

**6. REQUESTOR OF INFORMATION:**

- A. COMMISSIONER
- B. DEPARTMENT County Attorney
- C. DIVISION
- BY: David M. Owen  
*[Signature]*  
County Attorney

**7. BACKGROUND:**

To maintain its corporate status, the Lee County Governmental Leasing Corporation, a corporation not-for-profit, pursuant to Florida Statute 617, must hold its annual meeting and approve for filing with the Secretary of State the corporation's 2005 Annual Report. Minutes of corporate meetings held February 3, 2004 and March 9, 2004 are also attached.

**8. MANAGEMENT RECOMMENDATIONS:**

**9. RECOMMENDED APPROVAL:**

A Department Director	B Purchasing or Contracts	C Human Resources	D Other	E County Attorney	F Budget Services				G County Manager
N/A	N/A	N/A	N/A	<i>[Signature]</i> 1/26/05	OA <i>[Signature]</i> RK 1/26	OM <i>[Signature]</i>	RISK <i>[Signature]</i> or 1/26/05	GC <i>[Signature]</i> 1/26/05	<i>[Signature]</i>


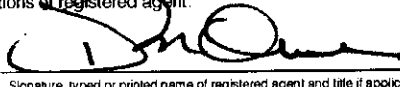
**10. COMMISSION ACTION:**

- APPROVED
- DENIED
- DEFERRED
- OTHER

CO. ATTY.  
FORWARDED  
TO CO. ADMIN.  
*1-26-05*

RECEIVED BY  
COUNTY ADMIN: *[Signature]*  
*1/26/05*  
3:20 pm 507  
COUNTY ADMIN  
FORWARDED TO: *[Signature]*  
*1/29/05*  
40m

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # N37978</b> 1. Entity Name <b>LEE COUNTY GOVERNMENTAL LEASING CORPORATION</b>					
Principal Place of Business % JAMES G. YAEGER 2115 2ND ST. FT. MYERS, FL 33901			Mailing Address % JAMES G. YAEGER 2115 2ND ST. FT. MYERS, FL 33901		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		01052005 Chg-NP CR2E037 (10/03)	
Zip		Country		4. FEI Number <b>65-0194072</b>	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>YAEGER, JAMES G.</b> <b>2115 2ND ST.</b> <b>FT. MYERS, FL 33901</b>				7. Name and Address of New Registered Agent Name <b>David M. Owen</b> Street Address (P.O. Box Number is Not Acceptable)  <b>2115 2ND ST.</b> City <b>FT. MYERS</b> <b>FL</b> Zip Code <b>33901</b>	
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.					
SIGNATURE		 David M. Owen, Lee County Attorney			DATE <b>2/15/05</b>
<b>Filing Fee is \$61.25 Due by May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D <input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	JANES, ROBERT	NAME	Janes, Robert		
STREET ADDRESS	2120 MAIN ST.	STREET ADDRESS	2120 Main St.		
CITY-ST-ZIP	FT. MYERS, FL 33901	CITY-ST-ZIP	Ft. Myers, FL 33901		
TITLE	D <input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	JUDAH, RAY	NAME	Judah, Ray		
STREET ADDRESS	2120 MAIN ST.	STREET ADDRESS	2120 Main St.		
CITY-ST-ZIP	FT. MYERS, FL 33901	CITY-ST-ZIP	Ft. Myers, FL 33901		
TITLE	D <input type="checkbox"/> Delete	TITLE	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	COY, ANDREW W	NAME	Hall, Tammy		
STREET ADDRESS	2120 MAIN ST.	STREET ADDRESS	2120 Main St.		
CITY-ST-ZIP	FT. MYERS, FL 33901	CITY-ST-ZIP	Ft. Myers, FL 33901		
TITLE	PD <input type="checkbox"/> Delete	TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ALBION, JOHN	NAME	Albion, John		
STREET ADDRESS	2120 MAIN ST.	STREET ADDRESS	2120 Main St.		
CITY-ST-ZIP	FT. MYERS, FL 33901	CITY-ST-ZIP	Ft. Myers, FL 33901		
TITLE	VD <input type="checkbox"/> Delete	TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ST CERNY, DOUGLAS R	NAME	St. Cerny, Douglas R.		
STREET ADDRESS	2120 MAIN ST.	STREET ADDRESS	2120 Main St.		
CITY-ST-ZIP	FT. MYERS, FL 33901	CITY-ST-ZIP	Ft. Myers, FL 33901		
TITLE	ST <input type="checkbox"/> Delete	TITLE	ST <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	STILWELL, DONALD D	NAME	Stilwell, Donald D.		
STREET ADDRESS	2115 SECOND STREET	STREET ADDRESS	2115 Second Street		
CITY-ST-ZIP	FT MYERS, FL 33901	CITY-ST-ZIP	Ft. Meyrs, FL 33901		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b>		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	
				Daytime Phone #	

# IMPORTANT INSTRUCTIONS

- Make check payable to Florida Department of State.  
Check must be payable in United States Funds and through a United States 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](http://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. If the preprinted mailing address in Block 1 is incorrect, enter the new mailing address in Block 3. A Post Office Box is acceptable.
- 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) 829-1040.
- 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 or mail service (PMB) 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 TRUSTEES. 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 Section 119.07(3)(i), 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.

FEBRUARY 03, 2004

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

John E. Albion, President  
Douglas R. St. Cerny, Vice President  
Ray Judah  
Andrew Coy  
Robert P. Janes

The President called the meeting to order at 10:00 a.m.

**ADMINISTRATIVE AGENDA**

**12. COUNTY ATTORNEY**

- (b) **ACTION REQUESTED:**  
Meet as Board of Directors of the Lee County Governmental Leasing Corporation to hold annual meeting, approve 2004 Annual Report, and approve the Minutes of the previous meetings.  
**WHY ACTION IS NECESSARY:**  
To meet requirements of Florida Statute 617.  
**WHAT ACTION ACCOMPLISHES:**  
Maintains non-profit corporate status. (#20040001-County Attorney)

Commissioner Judah moved the item, seconded by Commissioner Coy, called and carried.

The President adjourned the meeting at 10:01 a.m.

ATTEST:  
CHARLIE GREEN, CLERK

\_\_\_\_\_  
Deputy Clerk

\_\_\_\_\_  
President, Lee County  
Governmental Leasing Corporation

MARCH 09, 2004

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

John E. Albion, President  
Ray Judah  
Andrew Coy  
Robert P. Janes

COMMISSIONER ST. CERNY WAS ABSENT FOR THE ENTIRE MEETING DUE TO ILLNESS.

The President called the meeting to order at 10:35 a.m.

**ADMINISTRATIVE AGENDA**

**15. CONSTITUTIONAL OFFICERS**

(a) **ACTION REQUESTED:**

Request that the Lee County Governmental Leasing Corporation authorize the President to execute (sign) federal and state tax returns for the year ended September 30, 2003. No funds are required.

**WHY ACTION IS NECESSARY:**

Federal and state laws require that corporations file income tax and intangible tax returns.

**WHAT ACTION ACCOMPLISHES:**

Signing the tax returns and filing them with the respective authorities will serve as compliance with federal and state laws. (#20040194-Clerk of Courts

Commissioner Judah moved approval, seconded by Commissioner Janes, called and carried with Commissioner St. Cerny absent.

The President adjourned the meeting at 10:36 a.m.

ATTEST:  
CHARLIE GREEN, CLERK

\_\_\_\_\_  
Deputy Clerk

\_\_\_\_\_  
President, Lee County  
Governmental Leasing Corporation