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Form **990-EZ**
 Department of the Treasury
 Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
 (except black lung benefit trust or private foundation)
 ▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions)
 All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form
 ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150
2011
Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 01-01-2011, and ending 12-31-2011

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization LEE COUNTY EDUCATIONAL ADMINISTRATORS' ASSOCIATION INC Number and street (or P O box, if mail is not delivered to street address) Room/suite PO BOX 7393	D Employer identification number 65-0181654
	City or town, state or country, and ZIP + 4 FORT MYERS, FL 33911	E Telephone number (239) 482-1086
	F Group Exemption Number	

G Accounting method Cash Accrual Other (specify) _____

H Check if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: N/A

J Tax-Exempt status (check only one) — 501(c)(3) 501(c)(5) (insert no) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization or a section 527 organization **and** its gross receipts are normally **not** more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 56,904

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)
 Check if the organization used Schedule O to respond to any question in this Part I

Revenue	1 Contributions, gifts, grants, and similar amounts received	1	
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	56,479
	4 Investment income	4	425
	5a Gross amount from sale of assets other than inventory	5a	
	b Less cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b Gross income from fundraising events (not including \$ _ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b		
c Less direct expenses from gaming and fundraising events	6c		
d Net income or (loss) from gaming and fundraising events (Add lines 6a and 6b and subtract line 6c)	6d		
7a Gross sales of inventory, less returns and allowances	7a		
b Less cost of goods sold	7b		
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8 Other revenue (describe in Schedule O)	8		
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	56,904	
Expenses	10 Grants and similar amounts paid (list in Schedule O)	10	17,000
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	
	13 Professional fees and other payments to independent contractors	13	18,565
	14 Occupancy, rent, utilities, and maintenance	14	
	15 Printing, publications, postage, and shipping	15	
	16 Other expenses (describe in Schedule O)	16	15,446
17 Total expenses. Add lines 10 through 16	17	51,011	
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	5,893
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	117,326
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	123,219

Part II Balance Sheets

Check if the organization used Schedule O to respond to any question in this Part II

(See the instructions for Part II)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	117,326	22 123,219
23 Land and buildings		23
24 Other assets (describe in Schedule O)		24
25 Total assets	117,326	25 123,219
26 Total liabilities (describe in Schedule O)		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	117,326	27 123,219

Part III Statement of Program Service Accomplishments

Check if the organization used Schedule O to respond to any question in this Part III

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

What is the organization's primary exempt purpose?

THE OBJECTIVES AND PURPOSES OF THIS ORGANIZATION ARE GENERALLY TO PROMOTE, IMPROVE AND ENHANCE THE QUALITY OF PUBLIC EDUCATION IN LEE COUNTY, FLORIDA, THE STATE OF FLORIDA AND THE USA. THIS ASSOCIATION HAS BEEN FORMED WITH THE PURPOSE OF PROMOTING HIGH PROFESSIONAL EDUCATIONAL STANDARDS AMONG EDUCATIONAL ADMINISTRATORS. THIS ORGANIZATION ACTS AS AN INTERMEDIARY IN RESOLVING DISPUTES BETWEEN THE SCHOOL BOARD AND THE LEE COUNTY EDUCATIONAL ADMINISTRATORS. SPECIFICALLY, THE ORGANIZATION PROVIDES A FORUM FOR CANDIDATES FOR THE LEE COUNTY SCHOOL BOARD TO SPEAK. COMMITTEES ARE FORMED IN SEVERAL AREAS OF EDUCATION IN ORDER TO PROMOTE BETTER ADMINISTRATION OF THE EDUCATIONAL SYSTEM IN THAT AREA. THE ORGANIZATION PLANS SEMINARS TO ADVANCE THE EDUCATION OF ITS MEMEBERS. FINALLY, THE ORGANIZATION ALLOWS FOR THE INTERACTION OF COUNTY-WIDE ADMINISTRATORS TO TRADE INFORMATION ON PROBLEM SOLVING WITHIN THE SCHOOL SYSTEM.

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

28 TO PROVIDE SCHOLARSHIPS AND AWARDS. FIFTEEN SCHOLARSHIPS IN THE AMOUNT OF 1000 WERE AWARDED TO INDIVIDUAL STUDENTS DURING 2010. (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a
29 SUPPORT WAS PROVIDED TO THE LEE COUNTY SCHOOL BOARD AND EDUCATION ADMINISTRATORS THROUGH ADMINISTRATIVE ASSISTANCE AND EDUCATIONAL SEMINARS. (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a
30 (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a
31 Other program services (describe in Schedule O) (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a
32 Total program service expenses (add lines 28a through 31a)	32

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
See Additional Data Table				

Part V Other Information (Note the statement requirements in the instructions for Part V.)

Check if the organization used Schedule O to respond to any question in this Part V

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		No
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T		
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		No
35b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		
35c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		No
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions <input type="checkbox"/> 37a _____		
37b	Did the organization file Form 1120-POL for this year?		No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		No
38b	If "Yes," complete Schedule L, Part II and enter the total amount involved		
39	Section 501(c)(7) organizations. Enter		
39a	Initiation fees and capital contributions included on line 9		
39b	Gross receipts, included on line 9, for public use of club facilities		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> _____, section 4912 <input type="checkbox"/> _____, section 4955 <input type="checkbox"/> _____		
40b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		
40c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="checkbox"/> _____		
40d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization <input type="checkbox"/> _____		
40e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		No
41	List the states with which a copy of this return is filed <input type="checkbox"/> FL _____		
42a	The organization's books are in care of <input type="checkbox"/> HUGHES SNELL CO PA Telephone no <input type="checkbox"/> (239) 939-2233 1470 ROYAL PALM SQUARE BLVD Located at <input type="checkbox"/> FORT MYERS, FL _____ ZIP + 4 <input type="checkbox"/> 33919		
42b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country <input type="checkbox"/> _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	Yes	No
42c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country <input type="checkbox"/> _____		No
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/> 43 _____		
44a	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ.	Yes	No
44b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		No
44c	Did the organization receive any payments for indoor tanning services during the year?		No
44d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		

Yes **No**

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

46		No
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Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.

All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52.

Check if the organization used Schedule O to respond to any question in this Part VI

Yes **No**

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

47		
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48 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

48		
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49a Did the organization make any transfers to an exempt non-charitable related organization?

49a		
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b If "Yes," was the related organization a section 527 organization?

49b		
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50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 ▶ _____

52 Did the organization complete Schedule A? **NOTE:** All Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	***** Signature of officer	2012-03-01 Date
	MARTY MESCH EXECUTIVE DIRECTOR Type or print name and title	

Paid Preparer's Use Only	Preparer's signature WILLIAM C HUGHES	Date 2012-03-07	Check if self-employed <input type="checkbox"/>	Preparer's taxpayer identification number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 HUGHES SNELL & CO PA 1470 ROYAL PALM SQUARE BLVD FORT MYERS, FL 339191049			EIN Phone no (239) 939-2233

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Additional Data

Software ID:

Software Version:







EIN: 65-0181654

Name: LEE COUNTY EDUCATIONAL
ADMINISTRATORS' ASSOCIATION INC

Form 990-EZ, Special Condition Description:

Special Condition Description

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
MARTY MESCH  1019 NW 42ND PLACE CAPE CORAL, FL 33993	EXEC DIR 10 00	12,000		
TOMMY O'CONNELL  14020 PLANTATION RD FORT MYERS, FL 33912	VICE PRESIDE 2 00	0		
TERI CANNADY  2823 SE 19TH PLACE CAPE CORAL, FL 33904	PRESIDENT 2 00	0		
GERALD B DEMMING  108 NE 12TH COURT CAPE CORAL, FL 33909	TREASURER 2 00	0		
TOMMY BOWAN  3500 AQUALINA BLVD CAPE CORAL, FL 33914	DIRECTOR 2 00	0		
DENISE PHILLIPS-LUSTER  3000 OASIS GRAND BLVD 2905 FORT MYERS, FL 33916	SECRETARY 2 00	0		

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

**Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.**
▶ **Attach to Form 990 or 990-EZ.**

OMB No 1545-0047

2011

**Open to Public
Inspection**

Name of the organization
LEE COUNTY EDUCATIONAL
ADMINISTRATORS' ASSOCIATION INC

Employer identification number

65-0181654

Identifier	Return Reference	Explanation
GRANTS AND SIMILAR AMTS PAID TO INDIVIDUALS	FORM 990-EZ, PART I, LINE 10	NONE 15,000 0 0
OTHER EXPENSES	FORM 990-EZ, PART I, LINE 16	EXPENSES PRINTING POSTAGE AND SUPPLIES 70 OFFICE EXPENSE 2,066 BANK CHARGES 5 TRAVEL 3,067 CONFERENCES & MEETINGS 3,465 INSURANCE 6,180 LICENSES, DUES & FEES 593 TOTAL 15,446
PRIMARY EXEMPT PURPOSE	FORM 990-EZ, PART III	THE OBJECTIVES AND PURPOSES OF THIS ORGANIZATION ARE GENERALLY TO PROMOTE, IMPROVE AND ENHANCE THE QUALITY OF PUBLIC EDUCATION IN LEE COUNTY, FLORIDA, THE STATE OF FLORIDA AND THE USA THIS ASSOCIATION HAS BEEN FORMED WITH THE PURPOSE OF PROMOTING HIGH PROFESSIONAL EDUCATIONAL STANDARDS AMONG EDUCATIONAL ADMINISTRATORS THIS ORGANIZATION ACTS AS AN INTERMEDIARY IN RESOLVING DISPUTES BETWEEN THE SCHOOL BOARD AND THE LEE COUNTY EDUCATIONAL ADMINISTRATORS SPECIFICALLY, THE ORGANIZATION PROVIDES A FORUM FOR CANDIDATES FOR THE LEE COUNTY SCHOOL BOARD TO SPEAK COMMITTEES ARE FORMED IN SEVERAL AREAS OF EDUCATION IN ORDER TO PROMOTE BETTER ADMINISTRATION OF THE EDUCATIONAL SYSTEM IN THAT AREA THE ORGANIZATION PLANS SEMINARS TO ADVANCE THE EDUCATION OF ITS MEMEBERS FINALLY, THE ORGANIZATION ALLOWS FOR THE INTERACTION OF COUNTY-WIDE ADMINISTRATORS TO TRADE INFORMATION ON PROBLEM SOLVING WITHIN THE SCHOOL SYSTEM

TY 2011 Compensation Explanation

Name: LEE COUNTY EDUCATIONAL
ADMINISTRATORS' ASSOCIATION INC

EIN: 65-0181654

Person Name	Explanation
MARTY MESCH	
TOMMY OCONNELL	
TERI CANNADY	
GERALD B DEMMING	
TOMMY BOWAN	
DENISE PHILLIPSLUSTER	