

2001 UNIFORM BUSINESS REPORT (UBR)

8/7

FILED
Aug 22, 2001 8:00 am
Secretary of State

08-07-2001 90015 018 ****61.25

DOCUMENT # 732741

1. Entity Name

SUMTER COUNTY DEVELOPMENT COUNCIL, INC.

Principal Place of Business

~~107 BUSHNELL PLAZA
 SUITE 100
 BUSHNELL FL 33513~~

**225 S. 301
 Sumterville, FL
 33585**

Sumter County Development Council
 P.O. Box 70
 Sumterville, FL 33585

New Address



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2870873**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~LEWIS, CHARLES D.
 8208 CR 400-1
 LADY LAKE FL 32159~~

**DIANA LEE
 Interim Ex. Director
 PO Box 70
 Sumterville, FL 33585**

Name

Street Address (P.O. Box Number is Not Acceptable)

225 S. US 301

Sumterville, FL 33585

City

FL

Zip Code

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.

SIGNATURE

Diana Lee

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/31/01

DATE

**FILE NOW: FEE IS \$61.25
 After September 12, 2001, min. will be \$236.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	☒ Delete
NAME	MCCORMIC, DANIEL C	
STREET ADDRESS	PO BOX 100	
CITY-ST-ZIP	WILDWOOD FL 34785	
TITLE	PD	☒ Delete
NAME	SHAHER, CAROLYN	
STREET ADDRESS	1525 INDUSTRIAL DR	
CITY-ST-ZIP	WILDWOOD FL 34785	
TITLE	TD	☒ Delete
NAME	BROWN, KEN	
STREET ADDRESS	PO BOX 1209	
CITY-ST-ZIP	INVERNESS FL 34451	
TITLE	D	☒ Delete
NAME	PIERSON, TIM	
STREET ADDRESS	P.O. BOX 1687	
CITY-ST-ZIP	BUSHNELL FL 33513	
TITLE	VO	☒ Delete
NAME	HATCHER, JACK SR	
STREET ADDRESS	8632 CR 221	
CITY-ST-ZIP	WILDWOOD FL 34785	
TITLE	SD	☒ Delete
NAME	COUILLARD, DIANA	
STREET ADDRESS	609 OLD WIRE ROAD	
CITY-ST-ZIP	WILDWOOD FL 34785	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PB	☒ Change ☐ Addition
NAME	Alex Ogilvie	
STREET ADDRESS	406 S. Main St.	
CITY-ST-ZIP	Wildwood, FL 34785	
TITLE	VP D	☒ Change ☐ Addition
NAME	James Duncan	
STREET ADDRESS	PO Box 301	
CITY-ST-ZIP	Sumterville, FL 33585	
TITLE	SD	☒ Change ☐ Addition
NAME	Jane Dunnette	
STREET ADDRESS	115 N. Florida Street	
CITY-ST-ZIP	Bushnell, FL 33585	
TITLE	TD	☒ Change ☐ Addition
NAME	Dennis Rogers	
STREET ADDRESS	837 S. Main St.	
CITY-ST-ZIP	Wildwood, FL 34785	
TITLE	D	☒ Change ☐ Addition
NAME	Dan McCormic	
STREET ADDRESS	PO Box 1000	
CITY-ST-ZIP	Wildwood, FL 34785	

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.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/31/01

Date

Daytime Phone #

CR2037 (5/01)