

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 14, 2003 8:00 am
Secretary of State

07-14-2003 90333 021 ****61.25

001209

DOCUMENT # 732741

1. Entity Name

SUMTER COUNTY ECONOMIC DEVELOPMENT COUNCIL, INC.

NC
0.2.03/24/03
✓



Principal Place of Business

**225 S 301
SUMTERVILLE FL 33585**

Mailing Address

**P.O. BOX 70
SUMTERVILLE FL 33585**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2870873**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**LEE, DIANE
225 S US 301
P.O. BOX 70
SUMTERVILLE FL 33585**

7. Name and Address of New Registered Agent

Name **Lee, Diana**

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

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Diana Lee*

Diana Lee

7-7-03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PP** ☐ Delete
NAME **OGILVIE, ALEX**
STREET ADDRESS **406 S MAIN ST**
CITY-ST-ZIP **WILDWOOD FL 34785**

TITLE **VPD** ☐ Delete
NAME **DUNCAN, JAMES**
STREET ADDRESS **P.O. BOX 301**
CITY-ST-ZIP **SUMTERVILLE FL 33585**

TITLE **SD** ☐ Delete
NAME **BURNETTE, JANE**
STREET ADDRESS **115 N FLORIDA STREET**
CITY-ST-ZIP **BUSHNELL FL 33513**

TITLE **P** ☐ Delete
NAME **SIMPSON, JON**
STREET ADDRESS **4306 E CR 462**
CITY-ST-ZIP **WILDWOOD FL 34785**

TITLE **TD** ☒ Delete
NAME **MCCOY, KAY**
STREET ADDRESS **107 BUSHNELL PLAZA**
CITY-ST-ZIP **BUSHNELL FL 33515**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **TD**
STREET ADDRESS **Rogers, Dennis**
CITY-ST-ZIP **837 S. Main St. Wildwood, FL 34785**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 REQUIRED~~ **Jon Simpson** **7/10/03** **(352) 748-8711**

CP2E037 (4/03)