

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03682

FILED  
Jan 27, 2012  
Secretary of State

**Entity Name:** LADY LAKE AREA CHAMBER OF COMMERCE, INCORPORATED

**Current Principal Place of Business:**

106 S. US. HWY. 441  
LADY LAKE, FL 32159 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1430  
LADY LAKE, FL 32158

**New Mailing Address:**

**FEI Number:** 59-2501235

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HAYES, MARGARET M EX.DIR.  
106 SO. US HIGHWAY 27/441  
LADY LAKE, FL 32159 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: SCHELL, JUDY  
Address: 506 ALEXANDER ROAD  
City-St-Zip: LEESBURG, FL 34748

Title: VP  
Name: TUTT, WAYNE  
Address: 11974 CR 101, SUITE 105  
City-St-Zip: THE VILLAGES, FL 32162

Title: S  
Name: LAZO, JEANNE  
Address: PO BOX 730  
City-St-Zip: LADY LAKE, FL 32158

Title: T  
Name: KINNEY, MARGARET  
Address: 506 PALMER DRIVE  
City-St-Zip: LADY LAKE, FL 32159

Title: D  
Name: THEMME, CHUCK  
Address: 117 N US HWY 441  
City-St-Zip: LADY LAKE, FL 32159

Title: D  
Name: TOM, LOURY  
Address: P O BOX 1698  
City-St-Zip: DUNNELLON, FL 34430

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MARGARET M HAYES

EX D

01/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date