2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001707

FILED Apr 22, 2009 Secretary of State

Entity Name: LAKE EUSTIS YOUTH SAILING FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3400 LAKESHORE DR MOUNT DORA, FL 32757 **Current Mailing Address: New Mailing Address:** 3400 LAKESHORE DR MOUNT DORA, FL 32757 FEI Number: 30-0235724 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ZONNENBERG, MARTIN B.P. 3400 LAKESHORE DR MOUNT DORA, FL 32757 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition LADLEY, LEAH M Name: Name: 32918 C.R. 44 A NORTH Address: Address: City-St-Zip: EUSTIS, FL 32736 City-St-Zip: Title: Title: () Delete (X) Change () Addition YATES, CRAIG Name: YATES, CRAIG Name: Address: 920 ORANGE AVE Address: 13610 CAMP CHALLENGE ROAD City-St-Zip: TAVARES, FL 32778 City-St-Zip: SORRENTO, FL 32776 Title: () Delete Title: (X) Change () Addition ZONSENBERG, MARTIN E ZONNENBERG, MARTIN E Name: Name: 3400 LAKESHORE DR Address: Address: 3400 LAKESHORE DR City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: MOUNT DORA, FL 32757 Title: () Delete Title: () Change () Addition Name: ARNOLD, RICHARD Name: Address: 422 S CENTER STREET Address: City-St-Zip: EUSTIS, FL 32726 City-St-Zip: Title: () Delete Title: () Change () Addition ARNOLD, KATHY Name: Name: 422 S CENTER STREET Address: Address: City-St-Zip: EUSTIS, FL 32726 City-St-Zip: Title: () Delete Title: (X) Change () Addition KINNIE. RICHARD KECHRIOTIS, CHRIS Name: Name: Address: 504 WEST AVE Address: 2001 EDGEWATER DRIVE OCOEE, FL 34761 MOUNT DORA, FL 32757 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LEAH LADLEY T 04/22/2009