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

FILED
Mar 25, 2002 8:00 am
Secretary of State
03-25-2002 90043 022 ****61.25

DOCUMENT # N97000004189

1. Entity Name
Lake Sumter Children's Advocacy Center, Inc.

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427746

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2. Principal Place of Business	3. Mailing Address
220 N. Rockingham Ave.	220 N. Rockingham Ave.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tavares, Florida	City & State: Tavares, Florida
Zip: 32778 Country: USA	Zip: 32778 Country: USA

4. FEI Number: N/AE ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: Steven J. Richey
Street Address (P.O. Box Number is Not Acceptable): 601 South 9th Street
City: Leesburg, Florida FL Zip Code: 34748

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: Donna D. Richey 2/4/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25
Initial or Amended UBR

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	PD
NAME	Richey, Donna
STREET ADDRESS	1051 Boyleston Street
CITY-ST-ZIP	~~Leesburg, FL 34748~~
TITLE	VPD - Stinson, Paula
NAME	
STREET ADDRESS	32801 Lakeshore Drive
CITY-ST-ZIP	Tavares, FL 32778
TITLE	SD
NAME	Kirstie, Meredith
STREET ADDRESS	610 East Main Street
CITY-ST-ZIP	Leesburg, FL 34748
TITLE	TD
NAME	Camp, Timothy
STREET ADDRESS	515 W. Main Street
CITY-ST-ZIP	~~Leesburg, FL 34748~~
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CR2E037B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Donna D. Richey 2/4/02