2002 UNIFORM BUSINESS REPORT (UBR) AMENDED

FILED
05-20-2002 90021 046 ****61.25
N97000004189

02 MAY 29 AM 8:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N97000004189

1. Entity Name

LAKE SUMTER CHILDREN'S ADVOCACY CENTER, INC.

Principal Place of Business	Mailing Address
220 NORTH ROCKINGHAM AVENUE TAVARES FL 32778	220 NORTH ROCKINGHAM AVENUE TAVARES FL 32778

DO NOT WRITE IN THIS SPACE

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 NOT APPLICABLE ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ZUCKERMAN, BETTY
5002 ASHMEADE ROAD
ORLANDO FL 32810

7. Name and Address of New Registered Agent

Name: Diane L. Pisczek

Street Address (P.O. Box Number Is Not Acceptable): 10628 Summit Square Dr

City: Leesburg FL Zip Code: 34788

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: Diane L. Pisczek 4-23-02
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

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD RICHEY, DONNA 10511 BOYLSTON STREET LEESBURG FL 34748	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S FULLER, PEGGY 9317 FERNERY ROAD LEESBURG FL 34748	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition Fuller, Peggy 9317 Fernery RD Leesburg, FL 34748
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BUTTERFIELD, ELAINE 751 OLD MT. DORA ROAD EUSTIS FL 32726	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition Secretary Meredith Kirste 610 E. MAIN ST Leesburg, FL 34748
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HEWITT, SARAH JANE 2829 PORTOBELLO AVENUE LEESBURG FL 34748	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV WAHL, PETE 33426 LAKE BEND CIRCLE LEESBURG FL 34788	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 5/24
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LOUIS, DIANE 592 E ROSEWOOD AVE TAVARES FL 32757	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/01)

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Diane L. Pisczek SIGNATURE REQUIRED — Diane L Pisczek 352-343-6200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #