

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 04, 2005  
Secretary of State**

DOCUMENT# N98000005863

Entity Name: LEESBURG PARTNERSHIP II, INC.

**Current Principal Place of Business:**

111 SOUTH 6TH STREET  
LEESBURG, FL 34748

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 490043  
LEESBURG, FL 34749

**New Mailing Address:**

FEI Number: 59-3635358      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CHERRY, JON  
515 W MAIN ST  
LEESBURG, FL 34748      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: D      ( ) Delete  
Name: PADGETT, GREGORY P  
Address: 206 NORTH 3RD STREET  
City-St-Zip: LEESBURG, FL 34748

Title: D      ( ) Delete  
Name: CULLEN, CARMAN  
Address: 1124 APPLE TER  
City-St-Zip: LEESBURG, FL 34748

Title: D      ( ) Delete  
Name: RIDDLE, KEITH  
Address: 115 N. CANAL ST.  
City-St-Zip: LEESBURG, FL 34748

Title: D      ( ) Delete  
Name: CHERRY, JON  
Address: 515 W MAIN ST  
City-St-Zip: LEESBURG, FL 34748

Title: D      ( ) Delete  
Name: GALBREATH, JERRY  
Address: 115 MAGNOLIA ST  
City-St-Zip: LEESBURG, FL 34748

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D/P      (X) Change ( ) Addition  
Name: PADGETT, GREGORY P  
Address: 206 NORTH 3RD STREET  
City-St-Zip: LEESBURG, FL 34748

Title: D/PP      (X) Change ( ) Addition  
Name: CULLEN, CARMAN  
Address: 1124 APPLE TER  
City-St-Zip: LEESBURG, FL 34748

Title: D/VP      (X) Change ( ) Addition  
Name: MILLER, JIM  
Address: 1300 W NORTH BLVD  
City-St-Zip: LEESBURG, FL 34748

Title: D/T      (X) Change ( ) Addition  
Name: CHERRY, JON  
Address: 515 W MAIN ST  
City-St-Zip: LEESBURG, FL 34748

Title: D/S      (X) Change ( ) Addition  
Name: WONUS, BILL  
Address: 515 WEST MAIN STREET  
City-St-Zip: LEESBURG, FL 34748

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JON CHERRY

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

D/T

01/04/2005

\_\_\_\_\_  
Date