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CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 30 AM 10:50

DOCUMENT # **740885** (9)

1. Corporation Name

LEESBURG REGIONAL MEDICAL CENTER CHARITABLE FOUN DATION, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
600 E. DIXIE AVE. LEESBURG FL 34748	600 E. DIXIE AVE. LEESBURG FL 34748

3. Date Incorporated or Qualified: 11/23/1977
3a. Date of Last Report: 04/20/1994
4. FEI Number: 59-1800743 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

ROBUCK, H D, JR, ESQUIRE
610 E MAIN ST
LEESBURG FL 32748

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	11 TITLE	D ☒ Change ☐ Addition
NAME	RAST, GEORGE H.	12 NAME	Rast, George H.
STREET ADDRESS	1303 S 8TH ST	13 STREET ADDRESS	1303 S. 8th. Street
CITY-ST-ZIP	LEESBURG FL	14 CITY-ST-ZIP	Leesburg, FL 34748
TITLE	DVP	21 TITLE	DT ☒ Change ☐ Addition
NAME	RAST, MILDRED C.	22 NAME	Rast, Mildred C.
STREET ADDRESS	1303 S 8TH ST	23 STREET ADDRESS	1303 S. 8th. Street
CITY-ST-ZIP	LEESBURG FL	24 CITY-ST-ZIP	Leesburg, FL 34748
TITLE	D	31 TITLE	DP ☒ Change ☐ Addition
NAME	FAUST, BETTIE L.	32 NAME	Faust, Bettie L.
STREET ADDRESS	1620 LOVES POINT RD	33 STREET ADDRESS	1620 Loves Point Rd.
CITY-ST-ZIP	LEESBURG FL	34 CITY-ST-ZIP	Leesburg, FL 34748
TITLE	D	41 TITLE	DVP ☐ Change ☒ Addition
NAME	GRIFFIN, ELSIE R.	42 NAME	Howell, Jr., P. B.
STREET ADDRESS	206 E CROTON WAY	43 STREET ADDRESS	603 Gibson Street
CITY-ST-ZIP	HOWEY-IN-THE-HILLS FL	44 CITY-ST-ZIP	Leesburg, FL 34748
TITLE	D	51 TITLE	D ☒ Change ☐ Addition
NAME	SHUTZE, WILLIAM H. M.	52 NAME	Bowersox, William P.
STREET ADDRESS	6222 N SILVER LAKE DR	53 STREET ADDRESS	505 W. Gibson Street
CITY-ST-ZIP	LEESBURG FL	54 CITY-ST-ZIP	Leesburg, FL 34748
TITLE	D	61 TITLE	DS ☒ Change ☐ Addition
NAME	WRIGHT, BARBARA	62 NAME	Wright, Barbara
STREET ADDRESS	2 PALM DRIVE, THE SPRINGS	63 STREET ADDRESS	2 Palm Drive, The Springs
CITY-ST-ZIP	VALAHA FL	64 CITY-ST-ZIP	Valaha, FL 34797

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: William P. Bowersox William P. Bowersox 3/24/95 904-7873202
SIGNATURE AND TYPED OR PRINTED NAME OF BIDDING OFFICER OR DIRECTOR — Date — Daytime Phone #

Director

000687

LEESBURG REGIONAL MEDICAL CENTER CHARITABLE FOUNDATION, INC.

1995 Board of Directors

D Carlton, Amelia
1427 Beverly Point Rd.
Leesburg, FL 34748

D Cauthen, Robin A.
9313 Silver Lake Drive
Leesburg, FL 34788

D Husebo, Wendell F.
9481 Silver Lake
Leesburg, FL 34788

D Robuck, Iris H.
9341 Silver Lake Drive
Leesburg, FL 34788

D Rose, William H.
102 Orchid Way
Howey-In-The-Hills, FL 34737

D Sentner, Kevin A.
1409 S. 8th St.
Leesburg, FL 34748

D Sherman, Joanne B.
30017 Johnson Point Rd.
Leesburg, FL 34748