

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90180 049 ****61.25

DOCUMENT # 716188

1. Entity Name

THE LEESBURG AREA CHAMBER OF COMMERCE, INC.

Principal Place of Business

~~3430 US HIGHWAY 27/441~~
~~FRUITLAND PARK FL 34731~~
~~US~~

Mailing Address

P.O. BOX 490309
 LEESBURG FL 34749
 US

C0013352



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

103 S. SIXTH STREET

3. Mailing Address

P.O. BOX 490309

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LEESBURG, FLORIDA

City & State

LEESBURG, FLORIDA

4. FEI Number

59-0330175

Applied For

Not Applicable

Zip

34748

Country

U.S.A.

Zip

34749-0309

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

DEESE, WILLIAM
2607 LEGEND COURT
LEESBURG FL 34748

7. Name and Address of New Registered Agent

Name

WILLIAM B. DEESE

Street Address (P.O. Box Number is Not Acceptable)

103 SOUTH SIXTH STREET

City

LEESBURG,

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

WILLIAM B. DEESE, EXECUTIVE DIRECTOR

William B. Deese 1-18-01

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

TITLE: **VP** ☐ Delete
 NAME: **SHIPLEY, RICHARD**
 STREET ADDRESS: **929 N. 14TH ST**
 CITY-ST-ZIP: **LEESBURG FL 34748**

TITLE: **ED** ☒ Delete
 NAME: **PUTERBAUGH, JOAN K**
 STREET ADDRESS: **3430 US HWY 27/441**
 CITY-ST-ZIP: **FRUITLAND PARK FL 34731**

TITLE: **PD** ☒ Delete
 NAME: **PRINGLE, GEORGE**
 STREET ADDRESS: **26600 ACE AVE**
 CITY-ST-ZIP: **LEESBURG FL**

TITLE: **PPD** ☒ Delete
 NAME: **BELIVEAU, GREG**
 STREET ADDRESS: **2001 OLD US HWY 441, SUITE A**
 CITY-ST-ZIP: **MOUNT DORA FL**

TITLE: **TD** ☒ Delete
 NAME: **MOBLEY, BILL**
 STREET ADDRESS: **701 LAKE PORT BOULEVARD**
 CITY-ST-ZIP: **LEESBURG FL**

TITLE: **P** ☒ Delete
 NAME: **ODOM, MARGO**
 STREET ADDRESS: **425 N. 3RD ST.**
 CITY-ST-ZIP: **LEESBURG FL 34748**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: **PPD** ☐ Change ☒ Addition
 NAME: **JIM MILLER**
 STREET ADDRESS: **1300 W. NORTH BLVD.**
 CITY-ST-ZIP: **LEESBURG, FL. 34748**

TITLE: **P** ☐ Change ☒ Addition
 NAME: **BRAD WEBER**
 STREET ADDRESS: **1341 GRIFFIN RD.**
 CITY-ST-ZIP: **LEESBURG, FL. 34748**

TITLE: **PD** ☐ Change ☒ Addition
 NAME: **KEITH RIDDLE**
 STREET ADDRESS: **115 CANAL ST.**
 CITY-ST-ZIP: **LEESBURG, FL. 34748**

TITLE: **TD** ☐ Change ☒ Addition
 NAME: **LYNNE SORRELL**
 STREET ADDRESS: **2701 S. BAY ST.**
 CITY-ST-ZIP: **EUSTIS, FL. 32726**

TITLE: **ED** ☐ Change ☒ Addition
 NAME: **WILLIAM DEESE**
 STREET ADDRESS: **103 S. SIXTH ST**
 CITY-ST-ZIP: **LEESBURG, FL. 34748**

TITLE: ☐ Change ☐ Addition
 NAME: ☐ Change ☐ Addition
 STREET ADDRESS: ☐ Change ☐ Addition
 CITY-ST-ZIP: ☐ Change ☐ Addition

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)