

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002088

Entity Name: DOWNTOWN LEESBURG BUSINESS ASSOCIATION, INC.**Current Principal Place of Business:**601 W. MAIN ST.
LEESBURG, FL 34748**Current Mailing Address:**PO BOX 491847
LEESBURG, FL 34749-1847 US**FEI Number: 91-2120251****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ROSS, DELORIS BTR
601 W. MAIN
LEESBURG, FL 34748 US*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**Officer/Director Detail :**

Title PAST PRESIDENT
Name GALBREATH, JEAN PAUL
Address 201 W MAIN ST
City-State-Zip: LEESBURG FL 34748

Title S
Name CZERNUCH, CONNIE
Address 703 W MAIN ST
City-State-Zip: LEESBURG FL 34748

Title T
Name ROSS, DELORIS
Address 601 W. MAIN ST
City-State-Zip: LEESBURG FL 34748

Title D
Name GALBREATH, JERRY
Address 420 W MAIN ST
City-State-Zip: LEESBURG FL 34748

Title D
Name MAINVILLE, DAWN
Address 414 W MAIN ST #201
City-State-Zip: LEESBURG FL 34748

Title PRESIDENT
Name HUEY, JOYCE
Address 410 W MAIN ST
City-State-Zip: LEESBURG FL 34748

Title VP
Name CONNER, LEAH
Address 117 N 7TH ST
City-State-Zip: LEESBURG FL 34748

I hereby 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 all other like empowered.

SIGNATURE: DAWN MAINVILLE**DIRECTOR****03/02/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date