

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03029

**Entity Name:** FLORIDA ANTIQUE BUCKET BRIGADE, INC.

**Current Principal Place of Business:**

C/O LES WESTLAKE  
P.O. BOX 628  
MOUNT DORA, FL 32756

**Current Mailing Address:**

C/O LES WESTLAKE  
P.O. BOX 628  
MOUNT DORA, FL 32756-0628 US

**FEI Number:** 65-0066578

**Certificate of Status Desired:** No

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

WESTLAKE, LES  
714 N. TREMAIN ST  
MOUNT DORA, FL 32757 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:** LES WESTLAKE

01/11/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            ROMIG, BOB  
Address        620 PORTOFINO DRIVE  
City-State-Zip: POINCIANA FL 34759

Title            SECRETARY  
Name            WESTLAKE, LES  
Address        P.O. BOX 628  
City-State-Zip: MOUNT DORA FL 32756-0628

Title            TREASURER  
Name            MCMAHON, LINDA  
Address        723 HERNANDEZ DRIVE  
City-State-Zip: THE VILLAGES FL 32159

Title            VICE-PRESIDENT  
Name            BORWEGEN, RICHARD  
Address        195 SINGAPORE ISLAND ROAD  
City-State-Zip: LEESBURG FL 34788

*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:** LESLIE MARK WESTLAKE

SECRETARY

01/11/2020

Electronic Signature of Signing Officer/Director Detail

Date