

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008415

Entity Name: LEADERSHIP LAKE COUNTY, INC.**Current Principal Place of Business:**24919 TURKEY LAKE ROAD
HOWEY IN THE HILLS, FL 34737**Current Mailing Address:**P.O. BOX 1501
TAVARES, FL 32778**FEI Number:** 26-0570199**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PERRY, MICHAEL
24919 TURKEY LAKE ROAD
HOWEY IN THE HILLS, FL 34737 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	CHMR
Name	OLSEN, SHERRI
Address	609 E. DIXIE AVENUE
City-State-Zip:	LEESBURG FL 34748

Title	VC
Name	MIDDLETON, MICHELL
Address	523 N. DONNELLY STREET
City-State-Zip:	MOUNT DORA FL 32757

Title	TREA
Name	PERRY, MICHAEL S
Address	107 N. LAKE AVENUE
City-State-Zip:	TAVARES FL 32778

Title	DIRECTOR
Name	MAIMONE, CAROLYN
Address	616 N. NEW HAMPSHIRE
City-State-Zip:	TAVARES FL 32778

Title	DIRECTOR
Name	COLLIER, GREG
Address	4295 W OLD US HWY 441
City-State-Zip:	MT DORA FL 32757

Title	DIRECTOR
Name	KELLY, RICH
Address	305 S. CANAL STREET
City-State-Zip:	LEESBURG FL 34748

Title	DIRECTOR
Name	NORRIS, LEAH
Address	P.O. BOX 221
City-State-Zip:	EUSTIS FL 32727

Title	DIRECTOR
Name	ENGLISH, ROB DR.
Address	P.O. BOX 490866
City-State-Zip:	LEESBURG FL 34749

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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: MICHAEL J. PERRY**TREASURER****01/25/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name RICKETSON, LINDA
Address 1400 US HWY 441 N.
SUITE 521
City-State-Zip: LADY LAKE FL 32159

Title DIRECTOR
Name PADGETT, GREG
Address 206 N. THIRD STREET
City-State-Zip: LEESBURG FL 34748

Title DIRECTOR
Name HOLDER, JACK
Address 360 WEST RUBY STREET
City-State-Zip: TAVARES FL 32778

Title DIRECTOR
Name DEGRAW, MIKE
Address 1010 NORTH SHORE DRIVE
City-State-Zip: LEESBURG FL 34748

Title DIRECTOR
Name MELVIN, MELANIE
Address 8130 CR 44, LEG A
City-State-Zip: LEESBURG FL 34748