

2014 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 PERRY, MICHAEL J SR.
Address 107 N. LAKE AVENUE
City-State-Zip: TAVARES FL 32778

Title TREA
Name PERRY, MICHAEL S
Address 107 N. LAKE AVENUE
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 NORRIS, LEAH
Address P.O. BOX 221
City-State-Zip: EUSTIS FL 32727

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

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

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

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****01/10/2014**

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