

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000005976

**Entity Name:** LAKE COUNTY VOICES OF REASON INC.

**Current Principal Place of Business:**

35624 CYPRESS CT.  
LEESBURG, FL 34788

**Current Mailing Address:**

35624 CYPRESS CT.  
LEESBURG, FL 34788 US

**FEI Number:** 84-1837832

**Certificate of Status Desired:** No

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

HURLBERT, NANCY L  
35624 CYPRESS CT  
LEESBURG, FL 34788 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 T  
Name HURLBERT, NANCY L  
Address 35624 CYPRESS CT  
City-State-Zip: LEESBURG FL 34788

Title D  
Name HAZELTON, MAE  
Address 2609 E. MOONLIGHT LN.  
City-State-Zip: EUSTIS FL 32726

Title D  
Name WILHELM, GREGORY  
Address 2055 LAKESHORE DR.  
City-State-Zip: MT. DORA FL 32757

Title D  
Name BARBARA, HILL  
Address 3336 CYPRESS GROVE DR.  
City-State-Zip: EUSTIS FL 32736

Title P  
Name BROWN, CASSANDRA  
Address 1910 NW 24 CT  
City-State-Zip: OCALA FL 34475

*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:** NANCY LEE HURLBERT

**TREASURER**

**04/10/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date