

2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N94000003076

Entity Name: LEESBURG PARTNERSHIP, INC.

Current Principal Place of Business:

401 WEST MAGNOLIA STREET
LEESBURG, FL 34748

Current Mailing Address:

PO BOX 490043
LEESBURG, FL 34749-0043 US

FEI Number: 59-3255632

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WILLIAMS, ROBERT Q ESQ
WILLIAMS, SMITH AND SUMMERS, P.A.
380 WEST ALFRED STREET
TAVARES, FL 32778-3298 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: JOE. W. SHIPES

10/18/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PAST PRESIDENT
Name HUEY, JOYCE R
Address 800 WASHINGTON AVENUE
City-State-Zip: LEESBURG FL 34748

Title TREASURER
Name STIVENDER, FRANK
Address PO BOX 490043
City-State-Zip: LEESBURG FL 34749-0043

Title PRESIDENT
Name WOOD, CHRISTOPHER
Address 503 LAKESHORE DR
City-State-Zip: LEESBURG FL 34748

Title VP
Name HAMILTON, WYLIE
Address 429 CRESTRUN LOOP
City-State-Zip: LEESBURG FL 34748

Title CEO
Name SHIPES, JOE W.
Address 475 GUERRANT STREET
City-State-Zip: UMATILLA FL 32784

Title SECRETARY
Name WILLIAMS, LENA
Address 401 WEST MAGNOLIA STREET
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: JOE SHIPES

CEO

10/18/2017

Electronic Signature of Signing Officer/Director Detail

Date