2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400003076

Entity Name: LEESBURG PARTNERSHIP, INC.

Entity Name: LEESBURG PARTNERSHIP, IN

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:

KNOWLES, STEPHEN PR 903 WEST NORTH BOULEVARD LEESBURG, FL 34748 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: STEPHEN KNOWLES 03/13/2013

Electronic Signature of Registered Agent

Officer/Director Detail:

Title D/P Title D/S

NameKNOWLES, STEPHEN PRESNameREDISKE, JAMES SECRAddress903 WEST NORTH BOULEVARDAddress914 W MAIN STREETCity-State-Zip:LEESBURG FL 34748City-State-Zip:LEESBURG FL 34748

Title D/T Title D/VP

Name HUEY, JOYCE TREAS Name THORPE, GREGORY V-PRES

Address 414 WEST MAIN STREET Address PO BOX 490861

City-State-Zip: LEESBURG FL 34748 City-State-Zip: LEESBURG FL 34749

Title D/PP

Name BRAUN, PHILIP P-PRES
Address 600 E. DIXIE AVENUE
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: STEPHEN KNOWLES PRESIDENT 03/13/2013

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 13, 2013

Secretary of State

CC2464239548

Date