2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#716188

FILED Mar 30, 2005 Secretary of State

Entity Name: THE LEESBURG AREA CHAMBER OF COMMERCE, INC.

Current Principal Place of Business: New Principal Place of Business:

103 SOUTH SIXTH STREET LEESBURG, FL 34748

Current Mailing Address: New Mailing Address:

P.O BOX 490309 P.O BOX 490309

LEESBURG, FL 34749 US LEESBURG, FL 347490309 US

FEI Number: 59-0330175 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DEESE, WILLIAM DEESE, WILLIAM B 103 SOUTH SIXTH STREET

103 SOUTH SIXTH STREET LEESBURG, FL 34748 LEESBURG, FL 34748

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: WILLIAM B DEESE 03/30/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PED (X) Change () Addition () Delete

ENGLISH, ROB ENGLISH, ROB Name: Name: P.O. BOX 866 Address: P.O. BOX 866 Address:

City-St-Zip: LEESBURG, FL 347490866 City-St-Zip: LEESBURG, FL 347490866

Title: TD Title: () Delete (X) Change () Addition RAHN, DOUG Name: RAHN, DOUG Name:

Address: 600 EASTDIXIE AVE Address: 600 EAST DIXIE AVE City-St-Zip: LEESBURG, FL 34748 City-St-Zip: LEESBURG, FL 34748

Title: PPD () Delete Title: PPD (X) Change () Addition SORRELL, LYNNE STEPHENS, BEN Name: Name:

1321 W. CITIZENS BLVD, SUITE A Address: 2708 S BAY ST. Address:

City-St-Zip: EUSTIS, FL 32726 City-St-Zip: LEESBURG, FL 34748

Title: () Delete Title: PED (X) Change () Addition

STEPHENS, BEN Name: Name: WALLACE, RON 1321 W. CITIZENS BLVD, SUITE A Address: Address: 212 E. MAIN STREET City-St-Zip: LEEGURG, FL 34948 City-St-Zip: LEESBURG, FL 34748

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WILLIAM B DEESE ED 03/30/2005