FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **727358** **(4)**

1. Corporation Name

BOYS' AND GIRLS' CLUBS OF LAKE COUNTY, INC.

Principal Place of Business	Mailing Address
400 EXECUTIVE BLVD PO BOX 491527 LEESBURG FL 34749-8527	400 EXECUTIVE BLVD PO BOX 491527 LEESBURG FL 34749-8527

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/05/1973
3a. Date of Last Report: 02/21/1994
4. FEI Number: 23-7318039 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

NEWTON, JOSEPH T JR
1911 HELMS AVE
LEESBURG FL 34748

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City **FL** 35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	PD	☑ Change ☐ Addition
NAME	WHITE, BRADLEY	12 NAME	Timothy H. Sennett	
STREET ADDRESS	900 14TH ST	13 STREET ADDRESS	P.O Box 491308	N/A
CITY-ST-ZIP	LEESBURG FL	14 CITY-ST-ZIP	Leesburg Fl. 34749	
TITLE	SD	21 TITLE	SD	☑ Change ☐ Addition
NAME	BRAUN, LAURA	22 NAME	Ann Hall	
STREET ADDRESS	6804 LAKEVIEW DR	23 STREET ADDRESS	1330 Citizens Blvd Suite 401	
CITY-ST-ZIP	YALAHA FL	24 CITY-ST-ZIP	Leesburg Fl. 34749	
TITLE	V	31 TITLE	TD	☑ Change ☐ Addition
NAME	SENNETT, TIM	32 NAME	Bradley White	
STREET ADDRESS	491308	33 STREET ADDRESS	900 N 14 St.	
CITY-ST-ZIP	LEESBURG FL 34749	34 CITY-ST-ZIP	Leesburg Fl.	
TITLE	TD	41 TITLE	✓	☑ Change ☐ Addition
NAME	STRICKLAND, JIMMY	42 NAME	Wiley Hill	
STREET ADDRESS	PO BOX 491532 N/A	43 STREET ADDRESS	03350 Picolata Cut off	
CITY-ST-ZIP	LEESBURG FL 34749	44 CITY-ST-ZIP	Fruitland Park Fl. 34731	
TITLE	D	51 TITLE	D	☑ Change ☐ Addition
NAME	NEWMAN, THOMAS	52 NAME	Sparkman Boggs	
STREET ADDRESS	214 NORTH 5TH ST	53 STREET ADDRESS	P.O Box 490240	N/A
CITY-ST-ZIP	LEESBURG FL	54 CITY-ST-ZIP	Leesburg Fl. 34749	
TITLE	C	61 TITLE		☐ Change ☐ Addition
NAME	TAYLOR, LARRY	62 NAME		
STREET ADDRESS	1029 W. MAGNOLIA ST	63 STREET ADDRESS		
CITY-ST-ZIP	LEESBURG FL	64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ Pres. 4/14/95 (904) 326-0411
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000749