

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

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

3. Date Incorporated or Qualified
09/05/1973

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 400 Executive Blvd.

26 P.O. Box 491527

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 Leesburg, Fl.

28 Leesburg, Fl.

Zip

Country

Zip

Country

24 34748

25 U.S.

29 34749-1527

30 U.S.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NEWTON, JOSEPH T JR
1911 HELMS AVE
LEESBURG FL 34748

81 Name

William J. Gunnin

82 Street Address (P.O. Box Number is Not Acceptable)

400 Executive Blvd.

83

300001746903

84 City

Leesburg

Zip Code

34748

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

William J. Gunnin

Executive Director

1-19-1996

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE
NAME SENNETT, TIMOTHY H
STREET ADDRESS P O BOX 491308
CITY - ST - ZIP LEESBURG FL

1.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME Hill, Wlie
1.3 STREET ADDRESS 03350 Picciola Cut Off
1.4 CITY - ST - ZIP Fruitland Park, 34731

TITLE SD ☐ DELETE
NAME HALL, ANN
STREET ADDRESS 1330 CITIZENS BLVD STE 401
CITY - ST - ZIP LEESBURG FL

2.1 TITLE SD ☒ Change ☐ Addition
2.2 NAME Fuller, Barbara
2.3 STREET ADDRESS 600 North Blvd. - Suite C
2.4 CITY - ST - ZIP Leesburg, Fl. 34748

TITLE TD ☐ DELETE
NAME WHITE, BRADLEY
STREET ADDRESS 900 N 14TH ST
CITY - ST - ZIP LEESBURG FL

3.1 TITLE TD ☐ Change ☐ Addition
3.2 NAME White, Bradley
3.3 STREET ADDRESS 900 N. 14th St
3.4 CITY - ST - ZIP Leesburg, Fl. 34748

TITLE V ☐ DELETE
NAME HILL, WILEY
STREET ADDRESS 03350 PICCIOLA CUT OFF
CITY - ST - ZIP FRUITLAND PARK FL

4.1 TITLE V ☒ Change ☐ Addition
4.2 NAME Hall, Ann
4.3 STREET ADDRESS 1330 Citizens Blvd - Suite 401
4.4 CITY - ST - ZIP Leesburg, Fl. 34748

TITLE V ☐ DELETE
NAME BAAS, SPARKMAN
STREET ADDRESS P O BOX 490240
CITY - ST - ZIP LEESBURG FL

5.1 TITLE V ☐ Change ☐ Addition
5.2 NAME Baas, Sparkman
5.3 STREET ADDRESS P.O. Box 490240
5.4 CITY - ST - ZIP Leesburg, 34749-0240

TITLE C ☐ DELETE
NAME TAYLOR, LARRY
STREET ADDRESS 1029 W. MAGNOLIA ST
CITY - ST - ZIP LEESBURG FL

6.1 TITLE C ☐ Change ☐ Addition
6.2 NAME Taylor, Larry
6.3 STREET ADDRESS 1029 W. Magnolia St.
6.4 CITY - ST - ZIP Leesburg, Fl. 34748

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)(k), 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:

William J. Gunnin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-19-96 904-787-1937

CR2E037 (12/95)

83-18-1996