

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 730845

1. Entity Name

LAKE COUNTY LEGAL AID SOCIETY, INC.

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90004 048 ****61.25

Principal Place of Business

Mailing Address

1500 EAST ORANGE AVENUE
EUSTIS FL 32726

1500 EAST ORANGE AVENUE
EUSTIS FL 32726-4309

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1615080

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

WATSON RONALD H.
1500 EAST ORANGE AVE.
EUSTIS FL 32726

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME SEWELL, STEPHEN G
STREET ADDRESS 907 WEBSTER STREET
CITY-ST-ZIP LEESBURG, FL 0 ☐ Delete

TITLE SD
NAME WATSON, RONALD H
STREET ADDRESS 1500 E ORANGE AVE
CITY-ST-ZIP EUSTIS, FL 0 ☐ Delete

TITLE TD
NAME RAY, JEFFERSON G, III
STREET ADDRESS 851 N DONNELLY STREET
CITY-ST-ZIP MT DORA, FL 0 ☐ Delete

TITLE D
NAME ROBUCK, H D, JR
STREET ADDRESS 610 EAST MAIN STREET
CITY-ST-ZIP LEESBURG FL ☐ Delete

TITLE VD
NAME DUGGAN, J ROBERT
STREET ADDRESS 1029 W. MAGNOLIA
CITY-ST-ZIP LEESBURG, FL 0 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 2023 N. Donnelly Street
CITY-ST-ZIP Mount Dora, FL 32757 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-03-00 352-357-2932