

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 748717

1. Entity Name

LAKE COUNTY AVIATION ASSOCIATION, INC.

FILED
Feb 09, 2001 8:00 am
Secretary of State

02-09-2001 90216 038 ****61.25

Principal Place of Business

8807 AIRPORT DRIVE
BOX 5
LEESBURG FL 34788
US

Mailing Address

% SUNAIR AVIATION
32650 ECHO DRIVE
LEESBURG FL 34788
US

00010000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1935421

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

KERTZ, JACOB
05005 MAGNOLIA RIDGE RD.
FRUITLAND PARK FL 34731-1208

Name

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

City

FL

Zip Code

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
WELLER, JOAN
34246 WOODRIDGE LANE
EUSTIS FL 32736 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD Melinda Simmons ☐ Change ☒ Addition
5397 N.E. 136th place
Oxford, FL 34484-2409

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
HONSTON, MARK
801 LANE OAK DRIVE
LEESBURG FL 34748 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD Sam Mazzotta ☐ Change ☒ Addition
903 Oak Leaf Ct.
Altamonte Springs, FL 32714

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
KERTZ, JACOB
05005 MAGNOLIA RIDGE RD
FRUITLAND PK FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
SAPP, BRIAN
36108 EAST SPRING LAKE BLVD
FRUITLAND PARK FL 34731 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD Kevin Robson ☐ Change ☒ Addition
12130 Nest Ct.
Grand Island, FL 32735

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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]* SIGNATURE RE/AUDIT Kertz

2/1/01 352-728-4435

Date Daytime Phone #

CR2E037 (10/00)