

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2001 8:00 am
Secretary of State

0082247

DOCUMENT # 760982

1. Entity Name

FIRST BAPTIST CHURCH OF LEESBURG FOUNDATION, INC

03-15-2001 90217 016 ****61.25

Principal Place of Business

**220 N. 13TH STREET
 LEESBURG FL 32748-4962**

Mailing Address

**220 N. 13TH STREET
 LEESBURG FL 32748-4962**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2209184**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**BLANCHARD, JUDY
 33045 LAKE BEND CIR
 LEESBURG FL 32748**

7. Name and Address of New Registered Agent

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

TITLE **T** ☐ Delete
 NAME **SMITH, GAYLE**
 STREET ADDRESS **11328 ICE COURT**
 CITY-ST-ZIP **LEESBURG FL 34748**

TITLE **S** ☐ Delete
 NAME **BAKER, PEGGY**
 STREET ADDRESS **2341 CONESTOGA DRIVE**
 CITY-ST-ZIP **LEESBURG FL 34748**

TITLE **T** ☐ Delete
 NAME **WALKER, JAMES**
 STREET ADDRESS **1009 COTTONWOOD**
 CITY-ST-ZIP **LEESBURG FL 34748**

TITLE **AS** ☐ Delete
 NAME **BLANCHARD, JUDY**
 STREET ADDRESS **33045 LAKE BEND CIRCLE**
 CITY-ST-ZIP **LEESBURG FL**

TITLE **T** ☐ Delete
 NAME **HUX, MARSHALL**
 STREET ADDRESS **1009 N SHORE DR.**
 CITY-ST-ZIP **LEESBURG FL 34748**

TITLE **T** ☒ Delete
 NAME **HUSEBO, LANNY**
 STREET ADDRESS **33845 OVERTON DR**
 CITY-ST-ZIP **LEESBURG FL 34788**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **T** ☐ Change ☒ Addition
 NAME **TEAGUE, GARY**
 STREET ADDRESS **2306 QUEEN PALM CT.**
 CITY-ST-ZIP **LEESBURG, FL 34748**

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

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 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 #

CR2E037 (10/00)