

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766164

FILED  
Jan 07, 2008  
Secretary of State

**Entity Name:** THE LAKE EUSTIS SAILING CLUB, INC.

**Current Principal Place of Business:**

1310 CR 452  
EUSTIS, FL 32726

**New Principal Place of Business:**

**Current Mailing Address:**

1310 CR 452  
EUSTIS, FL 32726

**New Mailing Address:**

**FEI Number:** 59-2904104

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LINGEMAN, JAMES N  
37511 QUAIL RIDGE CIRCLE  
LEESBURG, FL 34788 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: TUSSING, TONY  
Address: 1630 GAUDRY STREET  
City-St-Zip: DELAND, FL 32720

Title: T ( ) Delete  
Name: LINGEMAN, JAMES N  
Address: 37511 QUAIL RIDGE CIRCLE  
City-St-Zip: LEESBURG, FL 34788

Title: D ( ) Delete  
Name: BENEDICT, TED  
Address: 109 CARDINAL LN  
City-St-Zip: EUSTIS, FL 32726

Title: C ( ) Delete  
Name: KINNIE, RICHARD  
Address: 504 W AVE  
City-St-Zip: OCOEE, FL 34761

Title: VC ( ) Delete  
Name: HEPTING, DAVID  
Address: 929 ROYAL OAK BLVD  
City-St-Zip: SAINT CLOUD, FL 34769

Title: D ( ) Delete  
Name: ARNOLD, RICHARD  
Address: 38445 TIMBERLAND RD  
City-St-Zip: UMATILLA, FL 32784

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: BOEKEMA, RANDY  
Address: 3510 HUNTERS TRAIL CIRCLE  
City-St-Zip: EUSTIS, FL 32726

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: C (X) Change ( ) Addition  
Name: HEPTING, DAVID  
Address: 929 ROYAL OAK BLVD  
City-St-Zip: SAINT CLOUD, FL 34769

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES N. LINGEMAN

TRES

01/07/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date