

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000117

FILED  
Jul 01, 2004  
Secretary of State

Entity Name: ANDREW J. SEMESCO FOUNDATION, INC.

## Current Principal Place of Business:

4700 SW ARCHER RD  
R123  
GAINESVILLE, FL 32608

## New Principal Place of Business:

1524 NW 22 ST  
GAINESVILLE, FL 32605

## Current Mailing Address:

POST OFFICE BOX 14173  
GAINESVILLE, FL 32604

## New Mailing Address:

FEI Number: 59-3667831      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FLEIGEL, JEFFREY D III  
4700 SW ARCHER RD  
R123  
GAINESVILLE, FL 32608 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: SEMESCO, STEPHEN  
Address: 1627 SE 13TH ST  
City-St-Zip: OCALA, FL 34471

Title: D ( ) Delete  
Name: FLEIGEL, JEFFREY D  
Address: 2015 SW 42ND PL  
City-St-Zip: OCALA, FL 34471

Title: T ( ) Delete  
Name: DEGROOT, DAVID B  
Address: 1524 NW 22ND ST  
City-St-Zip: GAINESVILLE, FL 32605

Title: P ( ) Delete  
Name: FLEIGEL, JEFFREY D III  
Address: 4700 SW ARCHER RD #R123  
City-St-Zip: GAINESVILLE, FL 32698

Title: V ( ) Delete  
Name: ANDERSON, RYAN W  
Address: 1107 NE 5TH ST  
City-St-Zip: OCALA, FL 34470

Title: S ( ) Delete  
Name: SEMESCO, MARGARUTE  
Address: 1627 SE 13TH ST  
City-St-Zip: OCALA, FL 34471

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: FLEIGEL, JEFFREY D  
Address: 2015 SW 42 PL  
City-St-Zip: OCALA, FL 34471

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JEFFREY DEE FLEIGEL III

P

07/01/2004

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

\_\_\_\_\_  
Date

WILLIAM T. MURPHY  
213 SE 15TH AVE  
OCALA, FL 34471