

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002413

FILED
Jun 13, 2004
Secretary of State

Entity Name: LAKE SUMTER SOCIETY FOR HUMAN RESOURCE MANAGEMENT, INC.

Current Principal Place of Business:

PO BOX 490003
LEESBURG, FL 347490003

New Principal Place of Business:

Current Mailing Address:

PO BOX 490003
LEESBURG, FL 347490003

New Mailing Address:

FEI Number: 74-3039698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
941 FOURTH STREET #200
MIAMI BEACH, FL 33139 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: NESLEIN, LYNNE
Address: PO BOX 490003
City-St-Zip: LEESBURG, FL 347490003

Title: D () Delete
Name: MUNNIHGH, LOUIS
Address: PO BOX 490003
City-St-Zip: LEESBURG, FL 347490003

Title: D () Delete
Name: FIELDS, KITTY
Address: PO BOX 490003
City-St-Zip: LEESBURG, FL 347490003

Title: D () Delete
Name: RAATZ, JUDY
Address: PO BOX 490003
City-St-Zip: LEESBURG, FL 347490003

Title: D () Delete
Name: KENNEDY, GAIL
Address: PO BOX 490003
City-St-Zip: LEESBURG, FL 347490003

Title: D () Delete
Name: FONTAINE, DEBRA
Address: PO BOX 490003
City-St-Zip: LEESBURG, FL 347490003

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FIELDS, KITTY L
Address: PO BOX 490003
City-St-Zip: LEESBURG, FL 347490003

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

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

Title: D (X) Change () Addition
Name: HEBROCK, BERNI
Address: PO BOX 490003
City-St-Zip: LEESBURG, FL 347490003

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: KITTY L. FIELDS

D

06/13/2004

Electronic Signature of Signing Officer or Director

Date