

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 16, 2003 8:00 am**  
**Secretary of State**

01-16-2003 90087 031 \*\*\*\*61.25

**DOCUMENT # N02000006747**

1. Entity Name  
**UNITY LEESBURG, INC**



Principal Place of Business  
**2115 G NORTH CITRUS BLVD.  
LEESBURG FL 34748**

Mailing Address  
**2115 G NORTH CITRUS BLVD.  
LEESBURG FL 34748**

**20010320**

2. Principal Place of Business  
**826 E. DIXIE AVE**

3. Mailing Address  
**826 E. DIXIE AVE**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**LEESBURG, FL**

City & State  
**LEESBURG, FL**

Zip  
**34748**

Country  
**LAKE**

Zip  
**34748**

Country  
**LAKE**

4. FEI Number

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**HAKANSON, KENNETH R  
2115 G NORTH CITRUS BLVD.  
LEESBURG FL 34748**

7. Name and Address of New Registered Agent

Name  
**HAKANSON, KENNETH R**

Street Address (P.O. Box Number is Not Acceptable)  
**826 E. DIXIE**

City  
**LEESBURG**

FL Zip Code  
**34748**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **KENNETH R. HAKANSON**  
*Kenneth R. Hakanson*

**1-14-03**

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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D HAKANSON, KENNETH R  
2470 E. CROOKED LAKE CLUB DR.  
EUSTIS FL 32726** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D NESMITH, WENDY  
2115 G NORTH CITRUS BLVD.  
LEESBURG FL 34748** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**CHARYSE COVINGTON  
428 E. ORANGE AVE  
EUSTIS, FL 32726** ☒ Change ☐ Addition  
**PRESIDENT OF  
THE BOARD**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D SUMMERS, JUNE  
2115 G NORTH CITRUS BLVD.  
LEESBURG FL 34748** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**BETH WHEELER  
133 HEATHER OAKS CIRCLE  
LADY LAKE, FL 32139** ☒ Change ☐ Addition  
**VICE PRESIDENT  
OF THE BOARD**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D BARTON, GEORGE  
2115 G NORTH CITRUS BLVD.  
LEESBURG FL 34748** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D HAKANSON, LEE  
2115 G NORTH CITRUS BLVD.  
LEESBURG FL 34748** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SD GREENLY, LEILANI  
2115 G NORTH CITRUS BLVD.  
LEESBURG FL 34748** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**LORRAINE BOND  
2507 WINONA AVE  
LEESBURG, FL 34748** ☒ Change ☒ Addition  
**SECRETARY OF  
BOARD**

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: **LEE HAKANSON**  
*Lee Hakanson*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)