

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000010616

FILED  
Apr 27, 2010  
Secretary of State

**Entity Name:** LAKE COUNTY TRAINING SCHOOL/CARVER HEIGHTS HIGH SCHOOL FOUNDATION, INC.

**Current Principal Place of Business:**

7150 TREASURE ISLAND ROAD  
LEESBURG, FL 34788 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 492002  
LEESBURG, FL 34749 US

**New Mailing Address:**

**FEI Number:** 27-1248912

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCNEALY, WILHELMENA  
7150 TREASURE ISLAND ROAD  
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: C  
Name: MCNEALY, WILHELMENA  
Address: 7150 TREASURE ISLAND RD  
City-St-Zip: LEESBURG, FL 34788 US

Title: VC  
Name: NASH, ALMA  
Address: 292 BENT OAK COURT  
City-St-Zip: LEESBURG, FL 34748 US

Title: S  
Name: RAWLS, BESSIE  
Address: 915 N. BLVD. E.  
City-St-Zip: LEESBURG, FL 34748 US

Title: T  
Name: BROWN, VINSON  
Address: 1948 PRUITT STREET  
City-St-Zip: LEESBURG, FL 34748 US

Title: M  
Name: SAMUEL, CAROLYN  
Address: 1310 SPRING LAKE RD  
City-St-Zip: FRUITLAND PARK, FL 34731 US

Title: M  
Name: HAYNES, DORIS  
Address: 305 OAKWOOD LANE  
City-St-Zip: FRUITLAND PARK, FL 34731 US

I hereby 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 all other like empowered.

SIGNATURE: WILHELMENA MCNEALY

C

04/27/2010

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

\_\_\_\_\_  
Date