

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N15581

1. Entity Name

LAKE EUSTIS VILLAGE PROPERTY OWNERS, INC.

Principal Place of Business

35315 ORANGE GROVE LN  
LEESBURG FL 34788  
US

Mailing Address

P O BOX 392  
GRAND ISLAND FL 32735  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WILLIS, PEGGY Lynn McCormick  
35315 ORANGE GROVE LANE 12509 Blue Heron Way  
LEESBURG FL 34788

Name

Lynn McCormick

Street Address (P.O. Box Number is Not Acceptable)

12509 Blue Heron Way

City

Leesburg

FL

Zip Code

34788

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.

SIGNATURE

Lynn McCormick

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  
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME MORSE, PHYLLIS  
STREET ADDRESS 12110 MARY LANE  
CITY-ST-ZIP LEESBURG FL 34788 ☒ Delete

TITLE VD  
NAME JENKINS, DARYL  
STREET ADDRESS 35229 ORANGE GROVE LANE  
CITY-ST-ZIP LEESBURG FL 34788 ☒ Delete

TITLE SD  
NAME LARRABEE, MARILYN  
STREET ADDRESS 12024 LAKEVIEW DR  
CITY-ST-ZIP LEESBURG FL 34788 ☐ Delete

TITLE D  
NAME WILLIS, PEGGY  
STREET ADDRESS 35315 ORANGE GRAVE LANE  
CITY-ST-ZIP LEESBURG FL 34788 ☒ Delete

TITLE D  
NAME ROGERS, WAITUS  
STREET ADDRESS 35307 HARBOR SHORES ROAD  
CITY-ST-ZIP LEESBURG FL 34788 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME Jennings, Daryl  
STREET ADDRESS 35229 ORANGE GROVE LN  
CITY-ST-ZIP Leesburg, FL 34788 ☒ Change ☐ Addition

TITLE  
NAME Warren, Janet  
STREET ADDRESS PO Box 350133  
CITY-ST-ZIP Grand Island, FL 32735 ☒ Change ☐ Addition

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

TITLE Treasurer TID  
NAME Lynn McCormick  
STREET ADDRESS 12509 Blue Heron Way  
CITY-ST-ZIP Leesburg, FL 34788 ☒ Change ☐ Addition

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

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

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:

SIGNATURE REQUIRED

Lynn McCormick

1/26/00

352 589 1761

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
Jan 29, 2000 8:00 am  
Secretary of State

01-29-2000 90038 042 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2855954

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required