

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23088

FILED  
Apr 04, 2011  
Secretary of State

**Entity Name:** LEESBURG BOATING CLUB, INC.

**Current Principal Place of Business:**

1 DOZIER CIRCLE  
LEESBURG, FL 34748 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 491043  
LEESBURG, FL 347498043 US

**New Mailing Address:**

**FEI Number:** 59-2328353

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DUNK, MILLIE  
1548 NORMANDY WAY  
LEESBURG, FL 34748 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: PD  
Name: KELLEY, RICH  
Address: 33706 OVERTON DRIVE  
City-St-Zip: LEESBURG, FL 34788

Title: VD  
Name: MARZEK, PETE MD  
Address: 33201 LAKE BEND CIRCLE  
City-St-Zip: LEESBURG, FL 34788

Title: VD  
Name: O'BRIEN, FRED  
Address: 35417 CRESCENT DRIVE  
City-St-Zip: FRUITLAND PARK, FL 34731

Title: TD  
Name: KNOWLES, STEVE  
Address: POB 492241  
City-St-Zip: LEESBURG, FL 34749

Title: SD  
Name: COMIS, DONNA  
Address: 3616 MOUNT HOPE LOOP  
City-St-Zip: LEESBURG, FL 34748

Title: SD  
Name: BOYD, DIANNE  
Address: 415 LAKESHORE DRIVE  
City-St-Zip: LEESBURG, FL 34748

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: STEVE KNOWLES

TD

04/04/2011

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

\_\_\_\_\_  
Date