

FILE NOW: FILING FEE IS \$61.25

FILED

May 07 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSDOCUMENT # N24035 (0)
1. Corporation Name
LAKE COUNTY CONSERVATION COUNCIL, INCORPORATED

Principal Place of Business

Mailing Address

1118 OLD MT DORA ROAD
EUSTIS FL 32726
US1118 OLD MT DORA RD
EUSTIS FL 32726-7319
US3. Date Incorporated or Qualified
12/21/19873a. Date of Last Report
03/18/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

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4. FEI Number

23-7109084

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FOLEY, NADINE D.
19001 TWIN PONDS RD
UMATILLA FL 32784

81 Name

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

83 2713 Griffin Ave.
Lady Lake, FL 32159

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP ☐ DELETE
NAME FOLEY, NADINE D.
STREET ADDRESS 19001 TWIN PONDS RD
CITY-ST-ZIP UMATILLA FL1.1 TITLE ☒ Change ☐ Addition
1.2 NAME DP
1.3 STREET ADDRESS Morris, Donna L.
1.4 CITY-ST-ZIP 2713 Griffin Ave.
Lady Lake, FL 32159TITLE D ☐ DELETE
NAME TURVILLE JR., HAROLD
STREET ADDRESS 150 W MINNEHAHA AVENUE
CITY-ST-ZIP CLERMONT FL2.1 TITLE ☐ Change ☐ Addition
2.2 NAME D
2.3 STREET ADDRESS Turville Jr., Hal
2.4 CITY-ST-ZIP 150 W. Minnehaha Ave.
Clermont, FL 32711TITLE VD ☒ DELETE
NAME MORRIS, ELIZABETH
STREET ADDRESS PO BOX 1087 N/A
CITY-ST-ZIP WEIRSDALE FL3.1 TITLE ☒ Change ☐ Addition
3.2 NAME DVP
3.3 STREET ADDRESS Schneider, Sheila
3.4 CITY-ST-ZIP 13224 Casper Lane
Clermont, FL 34711TITLE TD ☐ DELETE
NAME BENTON, JOHN
STREET ADDRESS 1118 OLD MT DORA RD
CITY-ST-ZIP EUSTIS FL4.1 TITLE ☐ Change ☐ Addition
4.2 NAME TD
4.3 STREET ADDRESS Benton, John
4.4 CITY-ST-ZIP 1118 Old Mt. Dora Road
Eustis, FL 32726TITLE D ☒ DELETE
NAME SWARTZ, GENA
STREET ADDRESS 1811 MAINE COURT
CITY-ST-ZIP TAVARES FL5.1 TITLE ☒ Change ☐ Addition
5.2 NAME D
5.3 STREET ADDRESS Reed, Rolon
5.4 CITY-ST-ZIP 16738 CR 448
Mt. Dora, FL 32757-9600TITLE D ☒ DELETE
NAME EMERY, EGOR
STREET ADDRESS 19020 LAKE SWATARA DR
CITY-ST-ZIP EUSTIS FL6.1 TITLE ☐ Change ☒ Addition
6.2 NAME D
6.3 STREET ADDRESS Foley, Nadine D.
6.4 CITY-ST-ZIP 19001 Twin Ponds Road
Umatilla, FL 32784

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 117, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0013683

CR2E037 (9/96)