

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2002 8:00 am
Secretary of State

09-08-2002 90088 047 ****61.25

DOCUMENT # N24035

1. Entity Name

LAKE COUNTY CONSERVATION COUNCIL, INCORPORATED

Principal Place of Business

1118 OLD MT DORA ROAD
 EUSTIS FL 32726
 US

Mailing Address

1118 OLD MT DORA RD
 EUSTIS FL 32726
 US

DU1361U4



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

313 Pond Rd.

Suite, Apt. #, etc.

3. Mailing Address

313 Pond

Suite, Apt. #, etc.

City & State

Mount Dora, FL

City & State

Mount Dora, FL

4. FEI Number

23-7109084

Applied For

Not Applicable

Zip

32757

Country

USA

Zip

32757

Country

USA

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

EGOR, EMERY
19020 LAKE SWATARA DRIVE
EUSTIS FL 32736

7. Name and Address of New Registered Agent

Name **Bernie Yokel**

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

313 Pond Rd.

City

Mount Dora, FL

FL

Zip Code

32757

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

Bernie Yokel President

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

(NOTE: Registered Agent signature required when reinstating)

Sept. 3, 2002

DATE

After September 13, 2002,
min. will be \$236.25.

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 **DP** ☐ Delete
 NAME **GRAY, RUTH**
 STREET ADDRESS **33325 E. LAKE JOANNA DR.**
 CITY-ST-ZIP **EUSTIS FL**

TITLE **D** ☒ Delete
 NAME **TURVILLE JR., HAROLD**
 STREET ADDRESS **150 W MINNEHAHA AVENUE**
 CITY-ST-ZIP **CLERMONT FL**

TITLE **DP** ☒ Delete
 NAME **EGOR, EMERY**
 STREET ADDRESS **19020 LAKE SWATARA DRIVE**
 CITY-ST-ZIP **EUSTIS FL 32736**

TITLE **D** ☒ Delete
 NAME **GRAY, RUTH**
 STREET ADDRESS **22235 E. LAKE JOANNA DRIVE**
 CITY-ST-ZIP **EUSTIS FL 32736**

TITLE **D** ☐ Delete
 NAME **YOKEL, BERNIE**
 STREET ADDRESS **313 POND RD**
 CITY-ST-ZIP **MT. DORA FL 32757**

TITLE **D** ☐ Delete
 NAME **RESNICK, ANNE**
 STREET ADDRESS **31739 TROPICAL SHORE DR**
 CITY-ST-ZIP **TAVARES FL 32778**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DVP** ☒ Change ☐ Addition
 NAME **Ruth Gray**
 STREET ADDRESS **33325 E. Lake Joanna Dr.**
 CITY-ST-ZIP **Eustis, FL 32736**

TITLE **DS** ☐ Change ☒ Addition
 NAME **Nancy Lopez**
 STREET ADDRESS **15812 Fairview Point**
 CITY-ST-ZIP **Tavares, FL 32778**

TITLE **DS** ☐ Change ☐ Addition
 NAME **Betty Emery**
 STREET ADDRESS **19020 Lake Swatara Dr.**
 CITY-ST-ZIP **Eustis, FL 32736**

TITLE **DT** ☐ Change ☐ Addition
 NAME **Sue Angermeyer**
 STREET ADDRESS **12710 Double Run Rd.**
 CITY-ST-ZIP **Astatula, FL 34705**

TITLE **DP** ☒ Change ☐ Addition
 NAME **Bernie Yokel**
 STREET ADDRESS **313 Pond Rd.**
 CITY-ST-ZIP **Mt. Dora, FL 32757**

TITLE **P** ☐ Change ☐ Addition
 NAME **Anne Resnick**
 STREET ADDRESS **31739 Tropical Shore Dr.**
 CITY-ST-ZIP **Tavares, FL 32778**

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:

Bernie Yokel **Bernie Yokel**

Sept. 3, 2002

352/383-0501

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (4/02)