

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24035

FILED
Apr 30, 2006
Secretary of State

Entity Name: LAKE COUNTY CONSERVATION COUNCIL, INCORPORATED

Current Principal Place of Business:

35544 ESTES RD
EUSTIS, FL 32736 US

New Principal Place of Business:

Current Mailing Address:

35544 ESTES RD
EUSTIS, FL 32736 US

New Mailing Address:

FEI Number: 23-7109084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EMERY, EGOR
35544 ESTES RD
EUSTIS, FL 32736 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: D () Delete
Name: STEWART, LINDA
Address: 33611 EAST LAKE JOANNA DR
City-St-Zip: EUSTIS, FL 32736

Title: D () Delete
Name: ABBEY, LYNN
Address: 1112 W MAIN ST APT E 5
City-St-Zip: LEESBURG, FL 34748

Title: DS () Delete
Name: LEONARD, PAT
Address: 2469 BROADVIEW AVE
City-St-Zip: EUSTIS, FL 32726

Title: DT () Delete
Name: ANGERMEIER, SUE
Address: 12710 DOUBLE RUN RD
City-St-Zip: ASTATULA, FL 34705

Title: DVP () Delete
Name: COSTELLO, RICHARD
Address: 812 SHIRLEY AVE
City-St-Zip: MOUNT DORA, FL 32757

Title: PD () Delete
Name: EMERY, EGOR
Address: 35544 ESTES RD
City-St-Zip: EUSTIS, FL 32736

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EGOR EMERY

PRES

04/30/2006

Electronic Signature of Signing Officer or Director

Date