2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 25, 2012
Secretary of State

DOCUMENT# N44907

Entity Name: FINANCING CORPORATION FOR THE SCHOOL BOARD OF LAKE COUNTY, FLORIDA

Current Principal Place of Business:

201 W. BURLEIGH BLVD.
TAVARES, FL 32778

New Principal Place of Business:

Current Mailing Address:

201 W. BURLEIGH BLVD.
TAVARES, FL 32778

New Mailing Address:

FEI Number: 59-3512681 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MACLEOD, CAROL J
201 WEST BURLEIGH BOULEVARD
TAVARES, FL 32778 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
Name: HOWARD, TOD
Address: 201 W BURLEIGH BLVD.
City-St-Zip: TAVARES, FL 32778

Title: P
Name: STIVENDER, DEBBIE
Address: 201 W BURLEIGH BLVD
City-St-Zip: TAVARES, FL 32778

Title: VP
Name: BRANDEBURG, ROSANNE
Address: 201 W. BURLEIGH BLVD.
City-St-Zip: TAVARES, FL 32778

Title: D
Name: FISCHER, KYLEEN
Address: 201 W. BURLEIGH BLDV.
City-St-Zip: TAVARES, FL 32778

Title: D
Name: MILLER, JIM
Address: 201 W. BURLEIGH BLVD.
City-St-Zip: TAVARES, FL 32778

Title: S
Name: MOXLEY, SUSAN
Address: 201 W. BURLEIGH BLVD.
City-St-Zip: TAVARES, FL 32778

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: CAROL MACLEOD T 05/25/2012

Electronic Signature of Signing Officer or Director — Date