

2001 UNIFORM BUSINESS REPORT (UBR)

4/1

FILED
May 18, 2001 8:00 am
Secretary of State

04-17-2001 90038 028 ****61.25

DOCUMENT # N44984

1. Entity Name

LAKE COUNTY RAIL TRAILS, INC.

Principal Place of Business

P.O. BOX 1863
 MT. DORA FL 32756
 US

Mailing Address

P.O. BOX 1863
 MT. DORA FL 32756
 US

2. Principal Place of Business

no change

3. Mailing Address

no change

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3864324

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

LAWRENCE, HENRY
 420 N DONNELLY STREET
 APT FOUR
 MOUNT DORA FL 32757

7. Name and Address of New Registered Agent

Name

Eloise F. Fisher (President)

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

327 Laura Ln

City

MT. Dora

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.

SIGNATURE

Eloise F. Fisher

Eloise F. Fisher 4/13/01

DATE

FILE NOW:
 FEE IS \$61.25

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 NAME STREET ADDRESS CITY-ST-ZIP	D REED, AUDREY 11148 REED ROAD HOWEY HILLS FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KEENAN, BOBBY 909 SOUTH NINTH ST LEESBURG FL 34748	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FISHER, ELOISE- 327 LAURA LANE MT DORA FL	☐ Delete <i>(Pres.)</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	James R. Fisher 327 Laura Ln. MT. Dora, FL 32757	☐ Delete <i>(Treasurer)</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Gene Molnar 2874 Crooked Lake EUSTIS, FL 32726	☐ Delete <i>D</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Susan Brown 1926 Satinwood Way Fruitland PK, FL 34731	☐ Delete <i>D</i>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ilene Rand (Secretary) 426 S. Ninth St. Leesburg, FL 34748	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Suzanne Reynolds 111 Lakeshore Dr. V-6 EUSTIS, FL 32726	☐ Change ☒ Addition <i>D</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Nevin Thompson 18426 Villa City Rd. Groveland, FL 34726	☐ Change ☒ Addition <i>D</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Eloise F. Fisher 4/13/01

Date

Daytime Phone #

CR2E037 (10/00)