

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N44984

1. Entity Name

LAKE COUNTY RAIL TRAILS, INC.

FILED

Apr 21, 2002 8:00 am
Secretary of State

04-21-2002 90843 003 ****61.25

Principal Place of Business

Mailing Address

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

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

2. Principal Place of Business

3. Mailing Address

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

7. Name and Address of New Registered Agent

FISHER, ELOISE
327 LAURA LANE
MOUNT DORA FL 32757

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE S
NAME RAND, ILENE ☒ Delete
STREET ADDRESS 426 S. 9TH ST
CITY-ST-ZIP LEESBURG FL 34748

TITLE D
NAME IRENE LEITSCHUH ☒ Change ☐ Addition
STREET ADDRESS 426 S. 9th St
CITY-ST-ZIP Leesburg FL 34748

TITLE D
NAME REYNOLDS, SUZANNE ☐ Delete
STREET ADDRESS 1111 LAKESHORE DR V-6
CITY-ST-ZIP EUSTIS FL 32726

TITLE P
NAME ☒ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE P
NAME FISHER, ELOISE ☐ Delete
STREET ADDRESS 327 LAURA LANE
CITY-ST-ZIP MOUNT DORA FL 32757

TITLE SP
NAME ☒ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME THOMPSON, NEVIN ☐ Delete
STREET ADDRESS 18426 VILLA CITY RD
CITY-ST-ZIP GROVELAND FL 34756

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD
NAME FISHER, JAMES R ☒ Delete
STREET ADDRESS 327 LAURA LANE
CITY-ST-ZIP MOUNT DORA FL 32757

TITLE TD
NAME William C. Davis ☒ Change ☐ Addition
STREET ADDRESS 800 Palm Ave
CITY-ST-ZIP Leesburg FL 34748

TITLE D
NAME MOLHAR, GENE ☐ Delete
STREET ADDRESS 2874 CROOKED LAKE
CITY-ST-ZIP EUSTIS FL 32726

TITLE VPD
NAME ☒ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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:

Suzanne K. Reynolds
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)