

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2001 8:00 am
Secretary of State

0002414

03-29-2001 90394 031 ****61.25

DOCUMENT # N92000000507

1. Entity Name

LAKE COUNTY AQUATICS SWIM CLUB, INC.

Principal Place of Business

1018 MONTEREY DRIVE
 LEESBURG FL 34748

Mailing Address

P.O. BOX 491173
 LEESBURG FL 34749-1173

2. Principal Place of Business

P.O. Box 491173

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LEESBURG, FL

City & State

4. FEI Number

59-3170475

Applied For

Not Applicable

Zip

34749-1173

Country

LAKE

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

LEACH, VIRGINIA
 1018 MONTEREY DR.
 LEESBURG FL 34748

7. Name and Address of New Registered Agent

Name **PERRY E BLESSING**

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

24917 BLUE SINK RD

City **HOWEY IN THE HILLS**

FL

Zip Code

34737

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

Perry E. Blessing *Perry E. Blessing*

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

3/26/01

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 **PD** ☐ Delete
 NAME **BAKICH, MICHAEL J**
 STREET ADDRESS **PO BOX 417**
 CITY-ST-ZIP **UMATILLA FL 32784**

TITLE **D** ☐ Delete
 NAME **HUDSON, CAROL A**
 STREET ADDRESS **04039 EAGLE RIDGE DR**
 CITY-ST-ZIP **FRUITLAND PARK FL 34731**

TITLE **VD** ☐ Delete
 NAME **BLESSING, PERRY E**
 STREET ADDRESS **PO BOX 152**
 CITY-ST-ZIP **HOWEY IN THE HILLS FL 34737**

TITLE **TD** ☒ Delete
 NAME **LEACH, VIRGINIA**
 STREET ADDRESS **1018 S. MONTEREY**
 CITY-ST-ZIP **LEESBURG FL 34748**

TITLE **SD** ☐ Delete
 NAME **DUNCAN, SCOTT S**
 STREET ADDRESS **12642 BAY HILL DR**
 CITY-ST-ZIP **GRAND ISLAND FL 32735**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

TITLE ☐ Change ☒ Addition
 NAME **TD**
 NAME **CONNIE BOODIER**
 STREET ADDRESS **35437 HAINES CREEK RD**
 CITY-ST-ZIP **LEESBURG, FL 34788**

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

TITLE ☐ Change ☐ Addition
 NAME
 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:

Perry E. Blessing **President & Director**

Date

2/11/01

Daytime Phone #

352-324-9782

CR2E037 (10/00)