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NONPROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 NOV 25 AM 8:25
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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-12/03/96--01142--010
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DOCUMENT # N95000000487 (7)

1. Corporation Name

LAKE EUSTIS CENTER FOR THE ARTS, INC.

Principal Place of Business	Mailing Address
113 N. BAY STREET EUSTIS FL 32726	113 N. BAY STREET EUSTIS FL 32726

3. Date Incorporated or Qualified: 01/26/1995
3a. Date of Last Report:

2. Principal Place of Business (21) | 2a. Mailing Address (26)

Suite, Apt. #, etc. (22) | Suite, Apt. #, etc. (27)

City & State (23) | City & State (28)

Zip (24) Country (25) | Zip (29) Country (30)

4. FEI Number: EIN 59-3283149 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SEMENTO, LAWRENCE J
531 N. BAY STREET
EUSTIS FL 32726

REINSTATEMENT

10. Name and Address of New Registered Agent

81 Name

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

83 96

84 City NOV 27 1996 FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: X Lawrence J. Semento 11/17/96
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	PD ☒ Change ☐ Addition
NAME	ZIEGENGEIST, MARY		1.2 NAME	MARY ZIEGENGEIST
STREET ADDRESS	2327 ALICE AVENUE		1.3 STREET ADDRESS	~~20 PINECREST~~ 3151 INDIAN TRAIL
CITY-ST-ZIP	EUSTIS FL 32726		1.4 CITY-ST-ZIP	EUSTIS, ~~FL 32726~~ 900002018549--3
TITLE	VD	☐ DELETE	2.1 TITLE	-12/03/96--01142--010
NAME	HIGGINS, KACE		2.2 NAME	****236.25 ****236.25
STREET ADDRESS	1006 WASHINGTON AVENUE		2.3 STREET ADDRESS	
CITY-ST-ZIP	EUSTIS FL 32726		2.4 CITY-ST-ZIP	
TITLE	SD	☒ DELETE	3.1 TITLE	SD ☐ Change ☒ Addition
NAME	PAIT, SUE E		3.2 NAME	NANCY BARNETT
STREET ADDRESS	17485 S.E. HIGHWAY 450		3.3 STREET ADDRESS	28 PINE ST
CITY-ST-ZIP	UMATILLA FL 32784		3.4 CITY-ST-ZIP	EUSTIS, FL 32726
TITLE	TD	☐ DELETE	4.1 TITLE	TD ☒ Change ☐ Addition
NAME	VOODRY, MADELEINE		4.2 NAME	MADELEINE VOODRY
STREET ADDRESS	1607 BERKSHIRE DRIVE		4.3 STREET ADDRESS	512 ESSEX AVE
CITY-ST-ZIP	EUSTIS FL 32726		4.4 CITY-ST-ZIP	MOUNT DORA, FL 32757
TITLE	D	☒ DELETE	5.1 TITLE	D ☐ Change ☒ Addition
NAME	PAIT, FRED		5.2 NAME	KATHLEEN RYAN
STREET ADDRESS	17485 S.E. HIGHWAY 450		5.3 STREET ADDRESS	3001 JAVENS CIRCLE, UNIT 13
CITY-ST-ZIP	UMATILLA FL 32784		5.4 CITY-ST-ZIP	MOUNT DORA, FL 32757
TITLE	D	☒ DELETE	6.1 TITLE	D ☐ Change ☒ Addition
NAME	WALLS, PAY		6.2 NAME	MICHAEL SZUNYOG
STREET ADDRESS	1301 EUSTIS ROAD		6.3 STREET ADDRESS	1307 E. LAKEVIEW
CITY-ST-ZIP	EUSTIS FL 32726		6.4 CITY-ST-ZIP	EUSTIS, FL ~~31716~~ 32726

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: SIGNATURE REQUIRE Madeleine Voodry 4/25/96 (352) 383-0382
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER Date Daytime Phone #

CR2E037 (12/96)