

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90330 032 ****61.25

DOCUMENT # N95000000487

1. Entity Name

LAKE EUSTIS MUSEUM OF ART, INC.



Principal Place of Business

113 N. BAY STREET
EUSTIS FL 32726

Mailing Address

113 N. BAY STREET
EUSTIS FL 32726

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

59-3283149

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

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

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. I am familiar with, and accept the obligations of registered agent.

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
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
NAME ZIEGENGEIST, MARY
STREET ADDRESS 3151 INDIAN TRAIL
CITY-ST-ZIP EUSTIS FL 32726

TITLE SD ☒ Delete
NAME BARNETT, NANCY
STREET ADDRESS 1005 LAKEVIEW DR.
CITY-ST-ZIP EUSTIS FL 32726

TITLE D ☒ Delete
NAME GILLESPIE, BONNIE
STREET ADDRESS 12345 PINE ISLAND DR.
CITY-ST-ZIP LEESBURG FL 34788

TITLE TD ☒ Delete
NAME DIPILLA, CLEME L
STREET ADDRESS 19451 SPRING OAK DR
CITY-ST-ZIP EUSTIS FL 32736

TITLE VP ☒ Delete
NAME STOCK, MADELINE
STREET ADDRESS 512 ESSEX AVE
CITY-ST-ZIP MOUNT DORA FL 32757

TITLE D ☒ Delete
NAME TERRY, ELIZA
STREET ADDRESS 2705 GABLE AVENUE
CITY-ST-ZIP EUSTIS FL 32726

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Change ☒ Addition
NAME Robbie Hollenbeck
STREET ADDRESS 33917 E. Lake Joanna Dr.
CITY-ST-ZIP Eustis, FL 32736

TITLE VPD ☐ Change ☒ Addition
NAME Eliza Terry
STREET ADDRESS 2705 Gable Ave. Eustis, 32726

TITLE SD ☐ Change ☒ Addition
NAME Nancy Barnett
STREET ADDRESS 1005 Lakeview Dr. Eustis, FL 32726

TITLE TD ☐ Change ☒ Addition
NAME Cleme L. Dipilla
STREET ADDRESS 19451 Spring Oak Dr Eustis, FL 32736

TITLE D ☐ Change ☒ Addition
NAME Mary Ziegengeist
STREET ADDRESS 3927 Sycamore Cir. Tavares, FL 32778

TITLE D ☐ Change ☒ Addition
NAME Madeleine Stock
STREET ADDRESS 512 Essex Dr. Mt. Dora, fl. 32757

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

Date

Daytime Phone #