

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003198

FILED  
Jan 14, 2005  
Secretary of State

**Entity Name:** COMMUNITY FOUNDATION OF SOUTH LAKE COUNTY, INC.

**Current Principal Place of Business:**

1105 BOWMAN STREET  
CLERMONT, FL 34711

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 121543  
CLERMONT, FL 34712

**New Mailing Address:**

**FEI Number:** 59-3343026

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BOYETTE, WADE  
BANKFIRST BLDG SECOND FLOOR  
1380 GRAND HWY  
CLERMONT, FL 34711 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: WALLACE, DENISE  
Address: PO BOX 120158  
City-St-Zip: CLERMONT, FL

Title: CD ( ) Delete  
Name: SEAYER, OAKLEY  
Address: P.O. BOX 120216 N/A  
City-St-Zip: CLERMONT, FL 347120216

Title: VPD ( ) Delete  
Name: LEE, STEVE  
Address: 698 W. HWY 50  
City-St-Zip: CLERMONT, FL 34711

Title: TD ( ) Delete  
Name: AUGUSTINE, ED  
Address: PO BOX 121370  
City-St-Zip: CLERMONT, FL 34712

Title: D ( ) Delete  
Name: HOGAN, KEITH  
Address: 310 ALMOND  
City-St-Zip: CLERMONT, FL 34711

Title: D ( ) Delete  
Name: MCMURPHY, LINDA  
Address: PO BOX 121003  
City-St-Zip: CLERMONT, FL 34712

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: LEE, STEVE  
Address: 698 W. HWY 50  
City-St-Zip: CLERMONT, FL 34711

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: MCMURPHY, LYNDIA  
Address: PO BOX 121003  
City-St-Zip: CLERMONT, FL 34712

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ED AUGUSTINE

TD

01/14/2005

Electronic Signature of Signing Officer or Director

Date