

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 04, 2005 8:00 am**  
**Secretary of State**

03-04-2005 90082 042 \*\*\*\*61.25



**DOCUMENT # 727358**  
 1. Entity Name  
**BOYS & GIRLS CLUBS OF LAKE & SUMTER COUNTIES, INC.**

Principal Place of Business: **400 EXECUTIVE BLVD LEESBURG FL 34748**  
 Mailing Address: **P.O. BOX 491527 LEESBURG FL 34749-1527**

2. Principal Place of Business: Suite, Apt. #, etc.  
 3. Mailing Address: **400 EXECUTIVE BLVD**  
 Suite, Apt. #, etc.

City & State: **LEESBURG, FL**  
 Zip: **34748**  
 Country

4. FEI Number: **59-1524504** Applied For:  Not Applicable:   
 5. Certificate of Status Desired:  **\$8.75** Additional Fee Required



1st MOORE CR2E037 (10/04)

6. Name and Address of Current Registered Agent  
**WORK, BETH H**  
**400 EXEC. BLVD**  
**LEESBURG FL 34748**

7. Name and Address of New Registered Agent  
 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 \_\_\_\_\_ (NOTE Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2005**

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: P <input type="checkbox"/> Delete	NAME: BROOKS, BRIAN STREET ADDRESS: 618 YORKTOWN DRIVE CITY-ST-ZIP: LEESBURG FL 34748
TITLE: VP <input type="checkbox"/> Delete	NAME: BRAUN, PHILLIP STREET ADDRESS: P.O. BOX 492256 CITY-ST-ZIP: LEESBURG FL 34749
TITLE: D <input checked="" type="checkbox"/> Delete	NAME: COX, AMY STREET ADDRESS: 807 WASHINGTON AVE CITY-ST-ZIP: LEESBURG FL 34748
TITLE: VP <input checked="" type="checkbox"/> Delete	NAME: TICE, ROBERT STREET ADDRESS: 1405 ARREDONDO DRIVE CITY-ST-ZIP: THE VILLAGES FL 32159
TITLE: VP <input type="checkbox"/> Delete	NAME: BARTCH, KRISTEN STREET ADDRESS: 1607 HILLTOP DRIVE CITY-ST-ZIP: MOUNT DORA FL 32757
TITLE: <input checked="" type="checkbox"/> Delete	NAME: BROOKS, THOMAS STREET ADDRESS: 206 N 3RD STREET CITY-ST-ZIP: LEESBURG FL 34748

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME: CHRIS WOOD STREET ADDRESS: 503 Lakeshore Drive CITY-ST-ZIP: Leesburg, FL 34748
TITLE: T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME: Mike Pederson STREET ADDRESS: 2617 Legend Court CITY-ST-ZIP: Leesburg, FL 34748
TITLE: S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME: Rachel Horn STREET ADDRESS: 1410 S. 9th Street CITY-ST-ZIP: Leesburg, FL 34748
TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____
TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____
TITLE: <input type="checkbox"/> Change <input type="checkbox"/> 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: *Beth Work* Executive Director 2/28/05 352-787-0053  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #