

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N28774

**Entity Name:** LEESBURG ART FESTIVAL, INC.

**Current Principal Place of Business:**

429 W. MAGNOLIA STREET  
LEESBURG, FL 34748

**Current Mailing Address:**

PO BOX 492857  
LEESBURG, FL 34749 US

**FEI Number:** 59-1830071

**Certificate of Status Desired:** No

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

STEFANOVIC, MARIA EXECUTIVE DIRECTOR  
429 W. MAGNOLIA STREET  
LEESBURG, FL 34748 US

*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:** MARIA STEFANOVIC

02/12/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            PECK, CHAD  
Address        26057 NEWCOMBE CIRCLE  
City-State-Zip: LEESBURG FL 34748

Title            PAST PRESIDENT  
Name            RICHASON, AMIE  
Address        33611 STETSON LANE  
City-State-Zip: LEESBURG FL 34788

Title            VP, TREASURER  
Name            BACHMANN, TIM  
Address        429 W. MAGNOLIA STREET  
City-State-Zip: LEESBURG FL 34748

Title            DIRECTOR  
Name            STEFANOVIC, MARIA  
Address        429 W. MAGNOLIA STREET  
City-State-Zip: LEESBURG FL 34748

*I hereby 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 all other like empowered.*

**SIGNATURE:** MARIA STEFANOVIC

**EXECUTIVE DIRECTOR**

02/12/2019

Electronic Signature of Signing Officer/Director Detail

Date