

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2002 8:00 am
Secretary of State

0473391 AV

DOCUMENT # 491734

1. Entity Name
LAKE GARDENS CORPORATION

03-12-2002 90268 029 ***150.00

Principal Place of Business
81 LAKE GARDENS DRIVE
STATE ROAD 621 EAST
LAKE PLACID FL 33852

Mailing Address
81 LAKE GARDENS DRIVE
STATE ROAD 621 EAST
LAKE PLACID FL 33852



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-1639345		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
DAVIS, HAYWARD H. 107 INTERLAKE BLVD. LAKE PLACID FL 33852				Name WILLIAM NIELANDER Street Address (P.O. Box Number is Not Acceptable) 116 E. INTERLAKE BLVD. City LAKE PLACID FL 33852			

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.

SIGNATURE *William Nielander* DATE 2/19/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
T RITTMAN, RAY 21 LAKE GARDENS DR LAKE PLACID FL 33852	<input checked="" type="checkbox"/> Delete	T PHILLIP MARGETTS 101 5th. STREET LAKE PLACID, FLA. 33852	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D FONEAL, ISAACS 80 LAKE GARDENS DR LAKE PLACID FL 33852	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
D WEED, JOHN 26 LAKE GARDENS DRIVE LAKE PLACID FL 33852	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
VP KELLEY, ROBERT 3 LAKE GARDENS DR. LAKE PLACID FL 33852	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
S GOINS, PATRICIA 35 LAKE GARDENS DR LAKE PLACID FL	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
P RICHARDSON, ANONA 25 LAKE GARDENS DR. LAKE PLACID FL 33852	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Anona Richardson Pres.* ANONA RICHARDSON, PRES. 2-21-2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)