

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90104 044 ****61.25

DOCUMENT # 701447

1. Entity Name

SERTOMA CLUB OF LAKE LAND INCORPORATED

Principal Place of Business

Mailing Address

**1747 GARY ROAD EAST
 LAKE LAND FL 33801**

**P.O. BOX 273
 LAKE LAND FL**

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

59-2061811

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

**HERMAN, STEPHEN D
 1271 SCOTTS LAND DRIVE
 LAKE LAND FL 33813**

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.

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

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DS** ☐ Delete
 NAME **LAKE, CHARLES**
 STREET ADDRESS **1747 GARY ROAD EAST**
 CITY-ST-ZIP **LAKE LAND FL 33801**

TITLE **DP** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **HERMAN, STEPHEN**
 STREET ADDRESS **1271 SCOTTS LAND DRIVE**
 CITY-ST-ZIP **LAKE LAND FL 33813**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **DP** ☐ Delete
 NAME **CASEY, SHARON**
 STREET ADDRESS **1041 SUGARTREE LN S**
 CITY-ST-ZIP **LAKE LAND FL 33813**

TITLE **D** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **DVP** ☐ Delete
 NAME **HOLLINGSWORTH, DENNIS**
 STREET ADDRESS **5011 LANCELOT COURT**
 CITY-ST-ZIP **LAKE LAND FL 33813**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☒ Delete
 NAME **DAVIS, JR., CHARLES H**
 STREET ADDRESS **112 E POINSETTIA STREET**
 CITY-ST-ZIP **LAKE LAND FL 33803**

TITLE **DS** ☐ Change ☒ Addition
 NAME **RAOUL L. WEINSTEIN**
 STREET ADDRESS **1533 LAGOON RD**
 CITY-ST-ZIP **LAKE LAND, FL 33803**

TITLE **D** ☐ Delete
 NAME **CONTI, ANTHONY**
 STREET ADDRESS **4421 HALLAMVIEW LN**
 CITY-ST-ZIP **LAKE LAND FL 33813**

TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

RAOUL L. WEINSTEIN / SEC. 2/22/02 (803) 665-6990

CR2E037 (9/01)