

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 709183

1. Entity Name

LAKE COLONY APTS. TWO, INC.

FILED
Apr 11, 2000 8:00 am
Secretary of State

04-11-2000 90032 003 ****61.25

Principal Place of Business 112-130 DOOLEN COURT NORTH PALM BEACH FL 33408	Mailing Address 112-130 DOOLEN COURT NORTH PALM BEACH FL 33408-5710
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 59-1113704	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ST JOHN, DICKER, AND CAPLAN
500 AUSTRALIAN AVE SO
SUITE 500
WEST PALM BCH FL 33470

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.

SIGNATURE _____ (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

TITLE	TD	<input type="checkbox"/> Delete
NAME	O'CONNOR, LUCILLE	
STREET ADDRESS	130 DOOLEN CT #102E	
CITY-ST-ZIP	N PALM BEACH FL 33408	
TITLE	PD	<input type="checkbox"/> Delete
NAME	VAN DER MOLEN, JOHN	
STREET ADDRESS	112 DOOLEN CT-203-F	
CITY-ST-ZIP	N PALM BEACH FL 33408	
TITLE	D	<input type="checkbox"/> Delete
NAME	COLLIN, LEE	
STREET ADDRESS	130 DOOLEN 105-E	
CITY-ST-ZIP	N PALM BEACH FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HIMMELSBACH, JOSEPH	
STREET ADDRESS	130 DOOLEN 210-E	
CITY-ST-ZIP	N PALM BEACH FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	DAWSON, ANN	
STREET ADDRESS	130 DOOLEN COURT 108-E	
CITY-ST-ZIP	N PALM BEACH FL 33408	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	STEEYES, GERALD	
STREET ADDRESS	112 DOOLEN CT 302F	
CITY-ST-ZIP	N PALM BEACH FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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		
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Sandy Valenti	
STREET ADDRESS	112 Doolen Court # 103	
CITY-ST-ZIP	N. Palm Beach, FL 33408	

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 furnished 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: *John Valenti* APRIL 3, 2000
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR OR Date Daytime Phone #

CR2E037 (9/99)