

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 12, 2001 8:00 am
Secretary of State

02-12-2001 90218 024 ****61.25

007131

DOCUMENT # 712273
 1. Entity Name
LEISURE LAKES PROPERTY OWNERS CIVIC ASSOCIATION,

Principal Place of Business P.O. BOX 3273 LAKE PLACID FL 33862 US	Mailing Address P.O. BOX 3273 LAKE PLACID FL 33862 US
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C0019927



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip	4. FEI Number 59-2878143	Applied For <input type="checkbox"/> Not Applicable
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6. Name and Address of Current Registered Agent
WEGNER, OTTLIN
1132 PEACHTREE DR
LAKE PLACID FL 33852

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 Ottlin A. Wegner DATE 1-17-2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS

T LATHROP, ADELINE M 3014 BEECH ST LAKE PLACID FL 33852	<input type="checkbox"/> Delete
P WEGNER, OTTLIN 1132 PEACHTREE LAKE PLACID FL 33852	<input type="checkbox"/> Delete
V RUSSO, JOHN 3012 BEECH ST LAKE PLACID FL 33852	<input type="checkbox"/> Delete
S RUSSO, GENI 3012 BEECH ST LAKE PLACID FL 33852	<input type="checkbox"/> Delete
D BOYCE, REESA 3000 BEECH ST LAKE PLACID FL 33852	<input type="checkbox"/> Delete
D BLOVSKY, JOHN 1012 PEACHTREE DR LAKE PLACID FL 33852	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Secretary Nancy Reaney 3008 Ash St Lake Placid, Fl. 33852	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Ottlin A. Wegner Date 1-17-2001 Daytime Phone # 863-699-9730
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/00)