2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State
01-21-2003 90533 005 ****61.25

DOCUMENT # 716082

1. Entity Name
LAKATO HAVEN IMPROVEMENT ASSOCIATION, INC.

Principal Place of Business	Mailing Address
6611 E. LAHAREN LN INVERNESS FL 34453 US	6611 E. LAHAREN LN INVERNESS FL 34453 US

☑ CHECK HERE IF MAKING CHANGES

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 59-2937991 ☐ 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
MCCALLA, VIRGINIA 6611 E LAHAVEN LN INVERNESS FL 34453	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. I am familiar with, and accept the obligations of registered agent.

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 Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ANGLETON, GERALDINE 6511 E LAHAVEN LANE INVERNESS FL 34453	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pres. KleinTANK, Gerald 6501 E. LAHAVEN LN INVERNESS, FL-34453	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP JONES, BEATRICE 6535 E LAHAVEN LANE INVERNESS FL 34453	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P. William Minshall 6535 E. LAHAVEN LN. INVERNESS, FL-34453	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S KERNS, MARCELINE 6625 TURNER CAMP RD. INVERNESS FL 34453	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Sec. Sally Gauthier 6565 E. Zero LN. INVERNESS, FL-34453	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MCCALLA, VIRGINIA 6611 E. LAHAVEN LN INVERNESS FL 34453	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treas. McCalla, Virginia 6611 E LAHAVEN LN. INVERNESS, FL-34453	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KLEINSTANK, GERALD 6501 E LAHAVEN LANE INVERNESS FL 34453	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Daigneau, Charlotte 6641 LAKATO LN. INVERNESS, FL-34453	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D REIS, TERRY 6501 E ZERO LANE INVERNESS FL 34453	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	McNeal, Jean 6630 LAKATO LN. INVERNESS, FL-34453	☑ Change ☐ Addition

CR2E037 (10/02)

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: Virginia McCalla VIRGINIA McCALLA 1/16/03 352-344-0968