

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2002 8:00 am
Secretary of State

02-28-2002 90074 014 ****61.25

DOCUMENT # 729275

1. Entity Name

LAVALLET TOWNHOUSE ASSOCIATION, INC.

Principal Place of Business

Mailing Address

KEVIN ETHERIDGE
 3298 SUMMIT BLVD., SUITE 4
 PENSACOLA FL 32503

KEVIN ETHERIDGE
 3298 SUMMIT BLVD., SUITE 4
 PENSACOLA FL 32503

2. Principal Place of Business

3. Mailing Address

Centre Group Properties, Inc.

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4400 Bayou Blvd Ste 35

City & State

City & State

Pensacola, FL

Zip

Country

Zip

Country

32561

USA

4. FEI-Number

59-2244662

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

ETHERIDGE, KEVIN R.
 3298 SUMMIT BLVD.
 SUITE 4
 PENSACOLA FL 32503

Name

E. Lorraine Stanger

Street Address (P.O. Box Number is Not Acceptable)

4400 Bayou Blvd Ste 35

City

Pensacola

FL

Zip Code

32503

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

E Lorraine Stanger (E. Lorraine Stanger)

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	P	<input type="checkbox"/> Delete
NAME	BREWTON, BILLY	
STREET ADDRESS	4300 W. FRANCISCO ROAD #39	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	MAY, GWEN	
STREET ADDRESS	4300 W. FRANCISCO ROAD #8	
CITY-ST-ZIP	PENSACOLA FL 32503	
TITLE	D	<input type="checkbox"/> Delete
NAME	ARBOGAST, LURTY	
STREET ADDRESS	4300 W. FRANCISCO ROAD #38	
CITY-ST-ZIP	PENSACOLA FL 32504	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	KERN, JOYCE	
STREET ADDRESS	4300 W. FRANCISCO RD., #40	
CITY-ST-ZIP	PENSACOLA FL 32503	
TITLE	D	<input type="checkbox"/> Delete
NAME	RISENAU, PENNY	
STREET ADDRESS	4300 W. FRANCISCO ROAD #25	
CITY-ST-ZIP	PENSACOLA FL 32503	
TITLE	D	<input type="checkbox"/> Delete
NAME	BOMBAY, JIM	
STREET ADDRESS	4300 W. FRANCISCO ROAD #39	
CITY-ST-ZIP	PENSACOLA FL	

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DR. Charles Kraselskey	
STREET ADDRESS	4300 W. Francisco Rd #1	
CITY-ST-ZIP	Pensacola FL 32503	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Richard Fowler	
STREET ADDRESS	4800 W. Francisco Rd #34	
CITY-ST-ZIP	Pensacola FL 32503	
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		

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]

SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/01)