## 2000 UNIFORM BUSINESS REPORT (UBR)

CITY-ST-7IP

SIGNATURE:

ST. PETERSBURG FL 33716

## Apr 17, 2000 8:00 am Secretary of State DOCUMENT # 731778 1. Entity Name 04-17-2000 90131 045 \*\*\*\*61.25 LAKE OVERLOOK UNIT 4 ASSOCIATION, INC. Principal Place of Business Mailing Address C/O RAMPART PROPERTIES, INC. C/O RAMPART PROPERTIES, INC. 10033 NINTH STREET NORTH, SECOND FLOOR 10033 NINTH STREET NORTH, SECOND FLOOR ST. PETERSBURG FL 33716-3804 ST. PETERSBURG FL 33716-3805 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1766174 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) OSBURN, BILLY K C/O RAMPART PROPERTIES, INC. 10033 NINTH STREET NORTH, SECOND FLOOR City Zip Code ST. PETERSBURG FL 33716 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to **FILE NOW:** Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. (66/6) $\Delta D$ Addition Change **VPD** TITLE TITLE Delete Hemson Turned a the Escol NAME NAME ORCUTT, PAULA STREET ADDRESS STREET ADDRESS 10033 NINTH ST. N. 2ND FL CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33716 Change ☐ Addition Delete TITLE TITLE Jun, Jean NAME FLYNN, JEAN NAME 100003 ath 25 0001 STREET ADDRESS STREET ADDRESS 10033 NINTH ST. N., 2ND FL CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33716 ☐ Addition ☐ Delete TITLE TITLE Monthaud, Virgina SANFORD, VIRGINIA NAME NAME STREET ADDRESS STREET ADDRESS 10033 NINTH ST. N., 2ND FLOOR CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33716 Addition Delete TITLE Change TITLE Hoedhart, Mudd NAME JUKUS, LEONARD NAME 10033 9 th Lat. W.C STREET ADDRESS STREET ADDRESS 10033 9TH ST. N. 2ND FL CITY-ST-ZIP CITY-ST-ZIP Potorsburg, FL ST. PETERSBURG FL 33716 Delete √ Addition TITLE TITLE NAME NAME JONES, MARY FRANCIS STREET ADDRESS 10033 9TH ST. N. 2ND FL STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33716 ☐ Delete TITLE ☐ Addition TD TITLE BAIRD, SHIRLEY T. NAME NAME STREET ADDRESS STREET ADDRESS 10033 9TH ST. N. 2ND FL

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12. Thereby certify that the information supplied with this filling 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.

FILED