

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90895 005 ****61.25

0037267

DOCUMENT # 756845

1. Entity Name

LEE'S CROSSING HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

5801 KIMBERTON WAY
 LAKE WORTH FL 33463
 US

5801 KIMBERTON WAY
 LAKE WORTH FL 33463
 US

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

59-2171079

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHARFF, BURTON G P.A.
 2315 SOUTH CONGRESS AVENUE
 WEST PALM BEACH FL 33406

Name **LARRY E. SCHNER, PA**

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

750 So. Dixie Hwy.

City **BOCA RATON**

FL

Zip Code **33432**

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 *Larry E. Schner P.A.* **Larry E. Schner P.A.**

3-26-02

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 **VPD** Delete
 NAME **DUECKER, WILLIAM**
 STREET ADDRESS **5801 KIMBERTON WAY**
 CITY-ST-ZIP **LAKE WORTH FL 33463**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **PD** Delete
 NAME **FORD, DIANE**
 STREET ADDRESS **5801 KIMBERTON WAY**
 CITY-ST-ZIP **LAKE WORTH FL 33463**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **TD** Delete
 NAME **KRONTZ, RUTH**
 STREET ADDRESS **5801 KIMBERTON WAY**
 CITY-ST-ZIP **LAKE WORTH FL 33463**

TITLE Change Addition
 NAME **TD Koch, William**
 STREET ADDRESS **5801 Kimberton way**
 CITY-ST-ZIP **Lake Worth, FL. 33463**

TITLE **SD** Delete
 NAME **FREDRICH, CHAD**
 STREET ADDRESS **5801 KIMBERTON WAY**
 CITY-ST-ZIP **LAKE WORTH FL 33463**

TITLE Change Addition
 NAME **SD Ford, Roberta**
 STREET ADDRESS **5801 Kimberton way**
 CITY-ST-ZIP **Lake Worth, FL. 33463**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change 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: *Sigam Ford* **Sigam Ford, President**

3/22/02

59-844-9443

CR2E037 (9/01)