## **2000 UNIFORM BUSINESS REPORT (UBR)**

changed, or on an attachment with an address, with all other like empowered.

## **FILED** DOCUMENT # **756858** Jan 24, 2000 8:00 am 1. Entity Name **Secretary of State** LAKE BENTLEY SHORES, INC. 01-24-2000 90011 034 \*\*\*\*61.25 Principal Place of Business Mailing Address 1920 EDGEWOOD DR. 1920 EDGEWOOD DR. LAKELAND FL 33803-3469 LAKELAND FL 33803 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2110877 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) MILLER, MARK 1 LAKE MORTON DRIVE LAKELAND FL 33801 Zip Code City FL 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. $\Box$ Added to Fees **Department of State** FEE IS \$61.25 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TITLE [] Change ☐ Addition Delete TITLE NOBLE, FRANCES NAME NAME STREET ADDRESS 1920 EDGEWOOD K-9 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Lakeland fl WALTER E. LANG Delete ☐ Change Addition TITLE TITLE 1920 EDGEWOOD DR NAME PESEK, JOE NAME STREET ADDRESS LAKELAND FI33803 STREET ADDRESS 1920 EDGEWOOD DR I-3 CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33803 Change Addition TITLE Delete TITLE PD ------NAME WHEELOCK, DANNY. NAME STREET ADDRESS STREET ADDRESS 750 SCOTT LAKE VILLAGE CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL Change ☐ Additioπ TITLE σt ☐ Delete TITLE NAME NAME MELITA, MIKE STREET ADDRESS STREET ADDRESS 1920 EDGEWOOD DR J-2 CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL [ ] Change ☐ Addition Delete TITLE TITLE NAME NAME BUNDY, GLORIA STREET ADDRESS STREET ADDRESS 1920 EDGEWOOD DR, M-4 CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33803 ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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