## 2003 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT#767276** 

FILED Apr 30, 2003 Secretary of State

Entity Name: LAKES OF THE MEADOW VILLAGE HOMES MASTER MAINTENANCE ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** C/O GUARANTEE MGT 7200 NW 7ST SUITE 300 MIAMI, FL 331262941 US **New Mailing Address: Current Mailing Address:** C/O GUARANTEE MGT 7200 NW 7ST SUITE 300 MIAMI, FL 331262941 US FEI Number: 59-2165738 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SKRLD, INC 201 ALHAMBRA CIRCLE, #1102 CORAL GABLES, FL 33134 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete NOBOA, ANTHONY ENGLAND, NANCY DP Name: Name: 15250-G SW 45 LANE Address: 15060 S.W. 49TH LANE, # A Address: City-St-Zip: MIAMI, FL 33185 City-St-Zip: MIAMI, FL 33185 Title: () Delete Title: (X) Change ( ) Addition AYLSWORTH, W M Name: CARDENAS, GABRIEL DVP Name: Address: 1500-D SW 49TH LANE Address: 15255 S.W. 45TH TERRACE, #D City-St-Zip: MIAMI, FL 33185 City-St-Zip: MIAMI, FL 33185 Title: () Delete Title: DVP (X) Change ( ) Addition MORAN, JOHN JORDAN ACOSTA, AURELIO DVP Name: Name: 14945 E S.W. 48TH TERRACE, #E 15070 S.W. 49TH LANE, #D Address: Address: City-St-Zip: MIAMI, FL 33185 City-St-Zip: MIAMI, FL 33185 Title: DS ( ) Delete Title: DS (X) Change ( ) Addition Name: SKOKAN, JULIETA Name: BERG, OLGA DS 15237-F SW 46 LANE Address: Address: 15070 S.W. 49TH LANE, #B City-St-Zip: MIAMI, FL 33185 City-St-Zip: MIAMI, FL 33185 Title: () Delete Title: ( ) Change (X) Addition CABEZAS, LAZARO DT Name: Name: 14945 S.W. 49TH LANE, #H Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33185

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY ENGLAND DP 04/30/2003