

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 19, 2000 8:00 am
Secretary of State

04-19-2000 90091 043 ****61.25

DOCUMENT # 770441

1. Entity Name

EAST LAKE WOODLANDS WOODS LANDING TOWNHOMES UNIT

Principal Place of Business

Mailing Address

1050 A ELW PKWY
 OLDSMAR FL 34677
 US

1050 A ELW PKWY
 OLDSMAR FL 34677
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2381011

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SCANNAVINO, DOMINICK
 1050 A ELW PKWY
 OLDSMAR FL 34677

Name

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

City

FL

Zip Code

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)

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: **VPMUNGBALL** Delete
 NAME: ~~MUNBALL~~ LUNDA
 STREET ADDRESS: 365 WOODS LANDING TRAIL
 CITY-ST-ZIP: OLDSMAR FL

TITLE: **T** Change Addition
 NAME: **KANNER, DEJON**
 STREET ADDRESS: 380 WOODS LANDING TRAIL
 CITY-ST-ZIP: OLDSMAR, FL 34677

TITLE: **DS** Delete
 NAME: RICHMAN, BONNIE
 STREET ADDRESS: 345 WOODS LANDING TRL
 CITY-ST-ZIP: OLDSMAR FL

TITLE: **D** Change Addition
 NAME: **ZWEGO, MARILYN**
 STREET ADDRESS: 120 WOOD LANDING TRAIL
 CITY-ST-ZIP: OLDSMAR, FL 34677

TITLE: **D** Delete
 NAME: MARTORANO, LEAH
 STREET ADDRESS: 505 WOODS LANDING TRAIL
 CITY-ST-ZIP: OLDSMAR FL

TITLE: **D** Change Addition
 NAME: **Carol Rokitski**
 STREET ADDRESS: 30 Woods Landing Trail
 CITY-ST-ZIP: Oldsmar, FL 34677

TITLE: **D** Delete
 NAME: EGAN, DEBBIE
 STREET ADDRESS: 65 WOODS LANDING TRAIL
 CITY-ST-ZIP: OLDSMAR FL

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: **PD** Delete
 NAME: MCKAUGHAN, HENRY
 STREET ADDRESS: 115 WOODS LANDING TRAIL
 CITY-ST-ZIP: OLDSMAR FL

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: **D** Delete
 NAME: KATZ, MARVIN
 STREET ADDRESS: 65 WOODS LANDING TRAIL
 CITY-ST-ZIP: OLDSMAR FL

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

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: *Henry J. Mckaughan*
HENRY J. MCKAUGHAN, PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-12-00

Date

727-284-6133

Daytime Phone #

CR2FR37 (9/99)