

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90497 040 ***150.00

0945933 AT

DOCUMENT # F98000005993
1. Entity Name
LAKE SEMINOLE SQUARE MANAGEMENT COMPANY, INC.



Principal Place of Business
111 WESTWOOD PLACE SUITE 200
NASHVILLE TN 37027

Mailing Address
111 WESTWOOD PLACE SUITE 200
NASHVILLE TN 37027

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 **59-2922555**

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CD	<input type="checkbox"/> Delete
NAME	SHERIFF, W E	
STREET ADDRESS	111 WESTWOOD PLACE, STE 200	
CITY-ST-ZIP	BRENTWOOD TN	
TITLE	P	<input type="checkbox"/> Delete
NAME	COATES, CHRISTOPHER J	
STREET ADDRESS	111 WESTWOOD PLACE, STE 200	
CITY-ST-ZIP	BRENTWOOD TN 37027	
TITLE	V	<input type="checkbox"/> Delete
NAME	KAESTNER, H T	
STREET ADDRESS	111 WESTWOOD PLACE, STE 200	
CITY-ST-ZIP	BRENTWOOD TN	
TITLE	VST	<input type="checkbox"/> Delete
NAME	HICKS, GEORGE T	
STREET ADDRESS	111 WESTWOOD PLACE, STE 200	
CITY-ST-ZIP	BRENTWOOD TN	
TITLE	V	<input type="checkbox"/> Delete
NAME	MONEY, JAMES T	
STREET ADDRESS	111 WESTWOOD PLACE, STE 200	
CITY-ST-ZIP	BRENTWOOD TN	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 607, 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: SIGNATURE REQUIRED George Hicks 3-27-03 615 221 2260
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)