

FILED

Jun 15, 2001 8:00 am
Secretary of State

05-14-2001 90012 049 ****61.25

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000003342

1. Entity Name

LAKE VICTORIA HOMEOWNERS' ASSOCIATION, INC.

LA

Principal Place of Business

Mailing Address

~~6001 LAKE VICTORIA DR.~~ 650 Victoria Square Lane
LAKELAND FL 33813 ~~6001 LAKE VICTORIA DR.~~ 650 Victoria Square Lane
LAKELAND FL 33813

7536



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-073-9367

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

GEARY, JOSEPH A ESQ.
100 E. MAIN ST.
LAKELAND FL 33801

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 D Delete
NAME CUSTRED, U.K.
STREET ADDRESS 5981 LAKE VICTORIA DR.
CITY-ST-ZIP LAKELAND FL 33813

TITLE Change Addition

TITLE D Delete
NAME CUSTRED, LUNDA F
STREET ADDRESS 5981 LAKE VICTORIA DR.
CITY-ST-ZIP LAKELAND FL 33813

TITLE Change Addition

TITLE D Delete
NAME RUSSELL, JAMES H
STREET ADDRESS 5981 LAKE VICTORIA DR.
CITY-ST-ZIP LAKELAND FL 33813

TITLE Treasurer Change Addition
NAME Alice Ray-Overstreet
STREET ADDRESS 5759 Lake Victoria Drive
CITY-ST-ZIP Lakeland, FL 33813-4709

TITLE Delete

TITLE Change Addition

TITLE Delete

TITLE Change Addition

TITLE Delete

TITLE 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.

Alice Ray-Overstreet
SIGNATURE: Alice Ray-Overstreet

TEDDER, GRIMSLEY & COMPANY, P.A.
103 South Florida Avenue
Lakeland, Florida 33801 59-2353076

April 25, 2001

863-646-4657

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR20037 (10/00)