2000 UNIFORM BUSINESS REPORT (UBR)

0009039

DOCUMENT # N06134

FILED

00 MAY 22 PM 12:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name

LUCERNE AT WOODLANDS HOMEOWNERS' ASSOCIATION, IN

Principal Place of Business	Mailing Address
3219 THOMASVILLE RD 18D TALLAHASSEE FL 32312	3219 THOMASVILLE RD 18D TALLAHASSEE FL 32312-2917

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3219 Thomasville Rd	3219 Thomasville Rd
Suite, Apt. #, etc.: 19A	Suite, Apt. #, etc.: 19A
City & State: Tallahassee FL	City & State: Tallahassee FL
Zip: 32312 Country:	Zip: 32312 Country:

4. FEI Number: 59-2589866 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

POWERS, JIM
3219 THOMASVILLE ROAD
#18D
TALLAHASSEE FL 32312

7. Name and Address of New Registered Agent

Name: DURWARD N. BREWER

Street Address (P.O. Box Number is Not Acceptable): 3219 Thomasville Rd 19A

City: TALLAHASSEE FL Zip Code: 32312

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: DURWARD N BREWER (DURWARD N BREWER) 5/22/00
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD POWERS, JIM 3219 THOMASVILLE ROAD, #18D TALLAHASSEE FL	☑ Delete	PD JOHNSON, ROBERT 3219 Thomasville Rd 2B Tallahassee, FL 32312	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V SHACKELFORD, LYNDA 3219 THOMASVILLE ROAD 1A TALLAHASSEE FL	☑ Delete	500003286425--3 -06/13/00--01025--004 *****61.25 *****61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BREWER, DURWARD 3219 THOMASVILLE ROAD, #19A TALLAHASSEE FL 32312	☐ Delete	TD same	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S POWERS, PAT 3219 THOMASVILLE ROAD, #18D TALLAHASSEE FL	☑ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RAYMOND, ROSE M 3219 THOMASVILLE ROAD, #17A TALLAHASSEE FL	☐ Delete	V same	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SARTHORY, JEANETTE 3219 THOMASVILLE ROAD, #19B TALLAHASSEE FL 32312	☐ Delete	SD same	☐ Change ☐ Addition

CR2E017 (9/99)

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: DURWARD N BREWER (DURWARD N BREWER) DURWARD N BREWER 5/22/00 488-9622
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #