

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N23480

1. Entity Name

LAKE LYAL LASSIE LEAGUE, INC.

FILED

Sep 12, 2000 8:00 am
Secretary of State

09-12-2000 90007 021 ****70.00

Principal Place of Business

3645 GUN CLUB RD.
WEST PALM BEACH FL 33416
US

Mailing Address

PO BOX 17362
WEST PALM BCH FL 33416-7362
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0125253

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BELL, CONNIE
8035 DILLMAN ROAD
WEST PALM BEACH FL 33411

7. Name and Address of New Registered Agent

Name PATRICIA HART-SMITH

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

4171 FERN STREET

City LAKE WORTH

FL

Zip Code 33461

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 PATRICIA HART-SMITH, TREASURER

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

9/7/00

DATE

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

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

TITLE PD
NAME HALE, MORRIS U
STREET ADDRESS 2702 ROCKY DRIVE, BAY A
CITY-ST-ZIP WEST PALM BEACH FL 33409 ☒ Delete

TITLE SD
NAME DUCOTE, MARY
STREET ADDRESS 74 CLEVELAND RD
CITY-ST-ZIP LAKE WORTH FL 33467 ☒ Delete

TITLE VD
NAME HAMMOND, JAMES W
STREET ADDRESS 3789 KENYON ROAD
CITY-ST-ZIP LAKE WORTH FL 33461 ☐ Delete

TITLE TD
NAME BELL, CONNIE
STREET ADDRESS 8035 DILLMAN ROAD
CITY-ST-ZIP WEST PALM BEACH FL 33411 ☒ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME HAMMOND, JAMES W.
STREET ADDRESS 3789 KENYON RD
CITY-ST-ZIP LAKE WORTH, FL 33461 ☒ Change ☐ Addition

TITLE SD
NAME STANLEY, LISA
STREET ADDRESS 1355 ELM BANK WAY
CITY-ST-ZIP ROYAL PALM BEACH, FL 33411 ☐ Change ☒ Addition

TITLE VD
NAME MARTIN, TIM
STREET ADDRESS 1355 ELM BANK WAY
CITY-ST-ZIP ROYAL PALM BEACH, FL 33411 ☐ Change ☒ Addition

TITLE TD
NAME PATRICIA HART SMITH
STREET ADDRESS 4171 FERN ST
CITY-ST-ZIP LAKE WORTH, FL 33461 ☐ Change ☒ Addition

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

TITLE ☐ Change ☐ 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 627, 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: JAMES HAMMOND
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 9/7/00 Daytime Phone # 561-

CR2E037 (5/00)