

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 20, 2000 8:00 am
Secretary of State

04-20-2000 90099 038 ****61.25

DOCUMENT # N31662

1. Entity Name

LAKE SUZY PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

12879 SW KINGS ROW
 LAKE SUZY FL 34266
 US

12879 SW KINGS ROW
 LAKE SUZY FL 34266-8685
 US

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

65-0259307

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BUNTEMAYER, JOHN, H
12879 SW KINGS ROW
LAKE SUZY FL 34266

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	VD	<input type="checkbox"/> Delete
NAME	HOUSER, JOYCE	
STREET ADDRESS	11725 SW DALLAS DRIVE	
CITY-ST-ZIP	LAKE SUZY FL 34266	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	GLINDMEIER, FRANK	
STREET ADDRESS	11792 S.W. COURTLY MANOR DRIVE	
CITY-ST-ZIP	LAKE SUZY FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	DANIEL, PRISCILLA	
STREET ADDRESS	12655 SW SUZY AVE	
CITY-ST-ZIP	LAKE SUZY FL 34266	
TITLE	SD	<input type="checkbox"/> Delete
NAME	URBANEK, JANICE	
STREET ADDRESS	12932 SW DAVID DRIVE	
CITY-ST-ZIP	LAKE SUZY FL 34266	
TITLE	TD	<input type="checkbox"/> Delete
NAME	BUNTEMAYER, JOHN H	
STREET ADDRESS	12879 SW KINGS ROW	
CITY-ST-ZIP	LAKE SUZY FL	
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	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Drinkwater, Joanna	
STREET ADDRESS	11600 S.W. Dallas Drive No.	
CITY-ST-ZIP	Lake Suzy, FL. 34266	
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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
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 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: *John H. Buntmeyer*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/00 **941-629-2557**

Date Daytime Phone #

CRE037 (9/99)