

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N43753

FILED
Apr 29, 2003
Secretary of State

Entity Name: LAKESHORE GARDENS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

431 WAVERLY ROAD
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

431 WAVERLY ROAD
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 59-3194681

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISAACS, DAN
431 WAVERLY ROAD
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SNYDER, KRISTEN
Address: 3271 JOHN HANCOCK DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: CROSBY, DAVID
Address: 182 IVERNIA LOOP
City-St-Zip: TALLAHASSEE, FL 32312

Title: TD () Delete
Name: SCHIRO, DEBRA
Address: 134 IVERNIA LOOP
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: WILKERSON, BERT
Address: 140 IVERNIA LOOP
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: BOWMAN, SHEILA
Address: 153 IVERNIA LOOP
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KRISTEN SNYDER

PRES

04/29/2003

Electronic Signature of Signing Officer or Director

_____ Date