## **2001 UNIFORM BUSINESS REPORT (UBR)**

## **FILED** May 02, 2001 8:00 am Secretary of State DOCUMENT # N9400002821 1. Entity Name LAKE CHATEAU ESTATES HOMEOWNERS ASSOCIATION, INC 05-02-2001 90087 026 \*\*\*\*61.25 Principal Place of Business Mailing Address 1450 CHALET PLACE 1450 CHALET PLACE PENSACOLA FL 32514 PENSACOLA FL 32514 2. Principal Place of Business 3. Mailing Address <u> 1805 Donegal Drive</u> <u>1805 Donegal Drive</u> DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Applied For 4. FEI Number 59-3321830 Pensacola Florida Pensacola Florida Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 32533 32533 Escambia Escambia 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Swords, Bobby L. Street Address (P.O. Box Number is Not Acceptable) EDWARDS, JAMES W 1450 CHALET PLACE PENSACOLA FL 32514 1805 Donecal Drive Zip Code Cantonment 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. 24 april 2001 (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. **Department of State FEE IS \$61.25** Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition TD TITLE Change TITI F Delete $\mathbf{TD}$ EDWARDS, JAMES W NAME NAME Swords, Bobby L. STREET ADDRESS STREET ADDRESS 1450 CHALET PLACE 1805 Danegal Drive CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32514 Cantonermt, FL 32533 Defete TITLE Change TITLE NAME RAMMEL, JOSEPH NAME Philpot, James STREET ADDRESS 1480 CHALET PL STREET ADDRESS 1470 Challet Place CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32514 Pensacola, FL 32514 Change Addition Delete TITLE TITLE NAME JENSEN, DARREL NAME STREET ADDRESS STREET ADDRESS 1481 CHALET PL CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32514 TITLE ☐ Delete □ Addition COLLINES. HELEN NAME NAME STREET ADDRESS 1420 CHALET PL STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32514 Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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:

24 april 2001