

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 28, 2003 8:00 am**  
**Secretary of State**

03-28-2003 90113 042 \*\*\*\*61.25

**DOCUMENT # N98000003186**



1. Entity Name  
**FOUR LAKES HOMEOWNERS' ASSOCIATION, INC.**

Principal Place of Business  
**1545 ABERDEEN LANE  
WINTER HAVEN FL 33881**

Mailing Address  
**1545 ABERDEEN LANE  
WINTER HAVEN FL 33881**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3520562**

Applied For  
 Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~MCCORNELL, SUSAN F  
1815 BELFRY LANE  
WINTER HAVEN FL 33881~~

Name **GEORGE HAUN**  
Street Address (P.O. Box Number is Not Acceptable)  
**2440 CROOKED STICK DRIVE**  
City **WINTER HAVEN, FL** Zip Code **33881**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*George Haun*

**3/25/03**

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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	MCCONNELL, SUSAN F	
STREET ADDRESS	1815 BELFRY LANE	
CITY-ST-ZIP	WINTER HAVEN, FL 33881	
TITLE	<del>SB TR.</del>	<input type="checkbox"/> Delete
NAME	HARDY, SR EA, JACK M	
STREET ADDRESS	1545 ABERDEEN LANE	
CITY-ST-ZIP	WINTER HAVEN FL 33881	
TITLE	<del>VP D</del>	<input type="checkbox"/> Delete
NAME	OSTER, ROBERT	
STREET ADDRESS	1414 WILD DUNES COURT	
CITY-ST-ZIP	WINTER HAVEN FL 33881	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	TAYLOR, ROBERT	
STREET ADDRESS	1441 WILD DUNES COURT	
CITY-ST-ZIP	WINTER HAVEN FL 33881	
TITLE	<del>Pres</del>	<input type="checkbox"/> Delete
NAME	HAUN, GEORGE	
STREET ADDRESS	2440 CROOKED STICK DRIVE	
CITY-ST-ZIP	WINTER HAVEN FL 33881	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HOLTHAUS, FRANCIS	
STREET ADDRESS	2408 CROOKED STICK DRIVE	
CITY-ST-ZIP	WINTER HAVEN FL 33881	

TITLE	SECC	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CHARLES J. YOST	
STREET ADDRESS	3912 SHOAL CREEK PLACE	
CITY-ST-ZIP	WINTER HAVEN, FL 33881	
TITLE	DIR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KEN YATES	
STREET ADDRESS	1740 GLEN-ABBY LANE	
CITY-ST-ZIP	WINTER HAVEN, FL 33881	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DOUG HALLEN	
STREET ADDRESS	1403 WILD DUNES COURT	
CITY-ST-ZIP	WINTER HAVEN, FL 33881	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	EFFIE JONES	
STREET ADDRESS	1249 LAS BRISAS LANE	
CITY-ST-ZIP	WINTER HAVEN, FL 33881	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FLOYD JOLIGT	
STREET ADDRESS	1265 LAS BRISAS LANE	
CITY-ST-ZIP	WINTER HAVEN, FL 33881	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RICHARD MANSFIELD	
STREET ADDRESS	941 LAQUINTA BLVD	
CITY-ST-ZIP	WINTER HAVEN, FL 33881	

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: *George Haun* **3/25/03 863/291-3857**

CR2E037 (10/02)

*Alfa Chm-CA*

**Four Lakes Golf Club**  
**Homeowners Association**

90063608  
# N98000003186

**Officers and Directors – 2003-2004**

**President / Director**

George Haun  
2440 Crooked Stick  
294-9462 ([hfh70fl@aol.com](mailto:hfh70fl@aol.com))

**Vice President / Director**

Richard Mansfield  
941 LaQuinta Blvd  
293-1526 ([richmom@att.net](mailto:richmom@att.net))

**Secretary / Director**

Chuck Yost  
2912 Shoal Creek Place  
291-3857 ([deyost@att.net](mailto:deyost@att.net))

**Treasurer / Director**

Jack Hardy  
1545 Aberdeen Lane  
401-9883 ([JMH1007@aol.com](mailto:JMH1007@aol.com))

**Director - Planning**

Ken Yates  
1740 Glen Abby Lane  
299-7816 ([smykwy@aol.com](mailto:smykwy@aol.com))

**Director - Appearance & Safety**

Floyd Joliet  
1265 Los Brisas Lane  
299-7453 ([floyd.joliet@gte.net](mailto:floyd.joliet@gte.net))

**Director/ Statutory Committee**

Bob Doster  
1414 Wild Dunes Court  
401-8227

**Director - Membership**

Effie Jones  
1249 Las Brisas Lane  
401-8673 ([jones1917@att.net](mailto:jones1917@att.net))

**Director - Resales**

Doug Hallen  
1403 Wild Dunes Court  
297-6517

**Fund Raising Responsibilities to be determined.**

Any Association member is invited to contact a Director in their area of concern. If unable to contact that particular person, please feel free to contact any officer and we will be happy to discuss your concerns with you.