

2000 UNIFORM BUSINESS REPORT (UBR)

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

05-20-2000 90001 021 ****61.25

DOCUMENT # N97000004745

1. Entity Name

LAKE PICKETT MANOR HOMEOWNERS' ASSOCIATION, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

4307 NEPTUNE ROAD
 ST. CLOUD FL 34769
 US

P.O. BOX 700665
 ST. CLOUD FL 34770-0665

2. Principal Place of Business

3. Mailing Address

5695 Beggs Road
 Suite, Apt. #, etc.

5695 Beggs Road,
 Suite, Apt. #, etc.

Suite B-100
 City & State

Suite B-100
 City & State

Orlando, FL

Orlando, FL

Zip
 32810

Country
 US

Zip
 32810

Country
 US

4. FEI Number
 59-3440314

Applied For
 Not Applicable

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

THORNTON, HARKLEY
 4307 NEPTUNE RD.
 ST. CLOUD FL 34769

Name
 Thornton, Harkley R. Esq.
 Street Address (P.O. Box Number is Not Acceptable)

5695 Beggs Road, Suite B-100
 City
 Orlando FL Zip Code
 32810

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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 DP
 GRAINGER, BRAD
 13146 ODYSSEY LAKE WAY
 ORLANDO FL 32826 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 P
 Grainger, Brad
 13146 Odyssey Lake Way
 Orlando, FL 32826 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 DV
 PARKER, TY
 13173 ODYSSEY LAKE CT
 ORLANDO FL 32826 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 V
 Parker, Ty
 13173 Odyssey Lake Way
 Orlando, FL 32826 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 DS
 COLON, NELSON
 P.O. BOX 700665
 ST CLOUD FL 34770 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 S
 Colon, Nelson
 13162 Odyssey Lake Way
 Orlando, FL 32826 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 DT
 MAHONEY, JOE
 12981 ODYSSEY LAKE WAY
 ORLANDO FL 32826 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 T
 Mahoney, JOe
 12981 Odyssey Lake Way
 Orlando, FL 32826 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 DAVIS, BERNADETTE
 1700 CIRCLE LAKE CT
 ORLANDO FL 32826 ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

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

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:

SIGNATURE REQUIRED

03-31-00

(407) 202-1764

CR2E037 (9/9)