

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 724501

1. Entity Name

LAKE BRYANT SHORES CIVIC ASSOCIATION, INC.

**FILED**  
**May 30, 2000 8:00 am**  
**Secretary of State**

05-30-2000 90079 033 \*\*\*\*61.25

Principal Place of Business

Mailing Address

RT. 1. BOX 1245  
OKLAWAHA FL 32179-9730

RT. 1. BOX 1245  
OKLAWAHA FL 32179-9625

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

NOT APPLICABLE

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

~~ROTHSTEIN, PAUL S.~~  
~~11 NORTH MAGNOLIA AVE.~~  
~~OCALA FL 32670~~

*Delete*

Name

DAVID H. HYTE

Street Address (P.O. Box Number is Not Acceptable)

17372 SE 37th LANE

City

OKLAWAHA

FL

Zip Code

32179

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

*David H. Hyte*

5-1-00

Signature, typed or printed name of registered agent and fee 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 ☐ Delete  
NAME D  
STREET ADDRESS GARDNER, MAC  
CITY-ST-ZIP 17440 SE 34TH LANE  
OKLAWAHA FL

TITLE ☒ Delete  
NAME S  
STREET ADDRESS MONROE, L MRS.  
CITY-ST-ZIP 3664 SE 173RD TERR  
OKLAWAHA FL 32179

TITLE ☒ Delete  
NAME T  
STREET ADDRESS URIG, VIVIAN  
CITY-ST-ZIP 3511 SE 174TH CT  
OKLAWAHA FL 32179

TITLE ☐ Delete  
NAME D  
STREET ADDRESS PENDELTON, ERNIE  
CITY-ST-ZIP 3620 SE 174TH CT  
OKLAWAHA FL 32179

TITLE ☐ Delete  
NAME D  
STREET ADDRESS GARDNER, JAMES V  
CITY-ST-ZIP 17855 SE 51ST STREET  
OKLAWAHA FL 32179

TITLE ☒ Delete  
NAME D  
STREET ADDRESS CRUPO, PETE  
CITY-ST-ZIP 17415 S E 34TH LANE  
OKLAWAHA FL

TITLE ☒ Change ☒ Addition  
NAME B PRESIDENT  
STREET ADDRESS DAYID H. HYTE  
CITY-ST-ZIP 17372 SE 37th LANE  
OKLAWAHA FL 32179

TITLE ☒ Change ☒ Addition  
NAME SECRETARY  
STREET ADDRESS ELEN HOPPER  
CITY-ST-ZIP 17400 SE 35th Lane  
OKLAWAHA, FLA. 32179

TITLE ☒ Change ☒ Addition  
NAME TREASURER  
STREET ADDRESS PENNY HYTE  
CITY-ST-ZIP 17372 SE 37th Lane  
OKLAWAHA, FLA. 32179

TITLE ☐ Change ☒ Addition  
NAME D  
STREET ADDRESS WALLACE JOLLY  
CITY-ST-ZIP 17334 SE 34th LANE  
OKLAWAHA FL 32179

TITLE ☐ Change ☒ Addition  
NAME D  
STREET ADDRESS LAURANCE POOLE  
CITY-ST-ZIP 3765 SE 174th CT  
OKLAWAHA, FL 32179

TITLE ☐ Change ☒ Addition  
NAME D  
STREET ADDRESS JESSE HOPPER  
CITY-ST-ZIP 17400 SE 35th LANE  
OKLAWAHA FL 32179

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:

*David H. Hyte*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5-1-00

CR2E037 (9/99)