

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 06, 2001 8:00 am**  
**Secretary of State**

02-06-2001 90258 023 \*\*\*\*61.25

**DOCUMENT # N01564**

1. Entity Name

**LAKE JESSIE MOBILE HOME OWNERS' ASSOCIATION, INC**

Principal Place of Business

**C/O ROBERT QUAKENBUSH  
 18 BASS CR NW  
 WINTER HAVEN FL 33881  
 US**

Mailing Address

**C/O ROBERT QUAKENBUSH  
 18 BASS CR NW  
 WINTER HAVEN FL 33881  
 US**

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

**59-2876534**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**HELMS, LARRY S.  
 60-2ND STREET, S.E.  
 WINTER HAVEN FL 33880**

7. Name and Address of New Registered Agent

Name **LEE JAY COLLING & ASSOC., PA**

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

**1930 E ROBINSON ST**

City

**ORLANDO**

FL

Zip Code

**32803**

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>BD GILBERT, ROBERT 66 PERCH ST WINTER HAVEN FL 33881</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD SABEAN, JORN 97 BASS CR WINTER HAVEN FL 33881</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD HOLLINGSHEAD, NORITA 116 BASS CIRCLE WINTER HAVEN FL 33881</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>BPD QUAKENBUSH, ROBERT 18 BASS CIR WINTER HAVEN FL 33881</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b><del>BD</del> SD MILLER, LOUIS 104 BASS CIRCLE WINTER HAVEN FL 33881</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>BDD MCKENZIE, BERNARD 113 BASS CIRCLE WINTER HAVEN FL 33881</b> <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>BD CHAS PICKARD 77 PERCH ST, N.W. WINTER HAVEN FL 33881-9029</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD WANDA BLAKE 53 BREMM ST WINTER HAVEN FL 33881 9029</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b><del>DALE BAILEY BD</del> <del>74 PERCH ST N.W.</del> <del>WINTER HAVEN FL 33881-9029</del></b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>BD MARY GILBERT 80 PERCH ST N.W. WINTER HAVEN FL 33881-9029</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>BVP DALE BAILEY 74 PERCH ST, N.W. WINTER HAVEN FL 33881-9029</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> 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**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**JAN 31, 01 863-956-2184**

CR2E037 (10/00)