

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000004745

1. Entity Name

LAKE PICKETT MANOR HOMEOWNERS' ASSOCIATION, INC.

FILED

Apr 23, 2001 8:00 am  
Secretary of State

04-23-2001 90244 037 \*\*\*\*61.25

Principal Place of Business

5695 BEGGS ROAD  
STE B-100  
ORLANDO FL 32810  
US

Mailing Address

5695 BEGGS ROAD  
STE B-100  
ORLANDO FL 32810  
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

59-3440314

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  
5695 BEGGS ROAD STE B-100  
ORLANDO FL 32810

Name

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

City

FL

Zip Code

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  
PD ☒ 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  
VD ☒ Change ☐ Addition  
13173 Odyssey Lake Way

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  
SD ☒ Change ☐ Addition  
13162 Odyssey Lake Way  
Orlando, FL 32826

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  
TD ☒ 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  
DD ☒ Change ☐ Addition  
Blake Palmer  
12969 Odyssey Lake Way  
Orlando, FL 32826

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DD ☒ Change ☐ Addition  
Carlos San Martin  
13003 Odyssey Lake Way  
Orlando, FL 32826

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/01

(407) 207-1764

CR2E037 (10/00)