

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 12, 2001 8:00 am
Secretary of State

06-12-2001 90003 023 ****61.25

0074669

DOCUMENT # N13866

1. Entity Name

LEISURE LAKE CO-OP, INC.

LA

Principal Place of Business

Mailing Address

**3003 US HIGHWAY 41 N
 PALMETTO FL 34221**

**3003 US HIGHWAY 41 N
 PALMETTO FL 34221**

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

59-2766457

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ENTLER, ALLEN
 3003 US HWY 41 N
 PALMETTO FL 34221**

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

Allen Entler

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	DS	<input type="checkbox"/> Delete
NAME	HESSSEL, BARBARA	
STREET ADDRESS	134 LAKEVIEW DR	
CITY-ST-ZIP	PALMETTO FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	O'NEIL, HELEN	
STREET ADDRESS	513 CENTRE STREET	
CITY-ST-ZIP	PALMETTO FL	
TITLE	DT	<input type="checkbox"/> Delete
NAME	SMITH, LARRY	
STREET ADDRESS	487 CHURCH RD	
CITY-ST-ZIP	PALMETTO FL	
TITLE	P	<input type="checkbox"/> Delete
NAME	KILLOCK, ROBERT	<input checked="" type="checkbox"/>
STREET ADDRESS	522 CENTRE ST	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	HURST, NANCY	
STREET ADDRESS	93 LAKEVIEW DR	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	REVILACQUA, SHIRLEY	
STREET ADDRESS	55 LEISURE WAY	
CITY-ST-ZIP	PALMETTO FL 34221	

TITLE	DS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Hessel, Barbara	
STREET ADDRESS	134 Lakeview Drive	
CITY-ST-ZIP	Palmetto, Fla. 34221	
TITLE	DP	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Hawkins, Winston	
STREET ADDRESS	405 Tropic Drive	
CITY-ST-ZIP	Palmetto, Fla. 34221	
TITLE	DVP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Hurst, Nancy	
STREET ADDRESS	93 Lakeview Dr.	
CITY-ST-ZIP	Palmetto, Fla. 34221	
TITLE	DT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Hosier, Carolyn	
STREET ADDRESS	360 Quiet Way	
CITY-ST-ZIP	Palmetto, Fla. 34221	
TITLE	DAT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lawrence Smith	
STREET ADDRESS	487 Church Rd.	
CITY-ST-ZIP	Palmetto, Fla. 34221	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: *Allen Entler*

CR2E037 (10/00)