

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 21, 2002 8:00 am
Secretary of State

02-21-2002 90010 019 ****61.25

DOCUMENT # N24153

1. Entity Name

MOUNTAIN LAKE COMMUNITY SERVICE, INC.

Principal Place of Business

MOUNTAIN LAKE
1 ALTERNATE 27 N. P.O. BOX 832
LAKE WALES FL 33859-0832

Mailing Address

MOUNTAIN LAKE
1 ALTERNATE 27 N. P.O. BOX 832
LAKE WALES FL 33859-0832

2. Principal Place of Business

2300 N. SCENIC HWY

3. Mailing Address

P.O. BOX 832

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LAKE WALES FL

City & State

LAKE WALES FL

Zip

33898

Country

USA

Zip

33859

Country

USA

4. FEI Number

59-2868636

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HUNT, D. ANDREW
225 E. PARK AVE.
LAKE WALES FL 33853

7. Name and Address of New Registered Agent

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

TITLE VD
NAME MEDITCH, MARIAN Y
STREET ADDRESS 97 MOUNTAIN LAKE
CITY-ST-ZIP LAKE WALES FL 33853 ☐ Delete

TITLE D
NAME RICHMOND, ELEANOR A
STREET ADDRESS 83 MOUNTAIN LAKE
CITY-ST-ZIP LAKE WALES FL 33853 ☐ Delete

TITLE D
NAME FELKER, CAROL C
STREET ADDRESS 50 MOUNTAIN LAKE
CITY-ST-ZIP LAKE WALES FL 33853 ☐ Delete

TITLE D
NAME BARRONS, JOY
STREET ADDRESS 15 MOUNTAIN LAKE
CITY-ST-ZIP LAKE WALES FL 33853 ☐ Delete

TITLE PD
NAME TAFF, KATHARINE
STREET ADDRESS 19 MOUNTAIN LAKE
CITY-ST-ZIP LAKE WALES FL 33853 ☒ Delete

TITLE SD
NAME HOYT, NANCY H
STREET ADDRESS 68 MOUNTAIN LAKE
CITY-ST-ZIP LAKE WALES FL 33853 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE TD
NAME WILLIAM G. BURNS
STREET ADDRESS 110 MOUNTAIN LAKE
CITY-ST-ZIP LAKE WALES, FL 33898 ☐ Change ☒ Addition

TITLE D
NAME CONNOR, SUSAN
STREET ADDRESS 61 MOUNTAIN LAKE
CITY-ST-ZIP LAKE WALES FL 33898 ☐ Change ☒ Addition

TITLE D
NAME NESBITT, DR THOMAS E, SR.
STREET ADDRESS 52 MOUNTAIN LAKE
CITY-ST-ZIP LAKE WALES, FL 33898 ☐ Change ☒ Addition

TITLE D
NAME FREEMAN, WILLIAM G. JR.
STREET ADDRESS 72 MOUNTAIN LAKE
CITY-ST-ZIP LAKE WALES, FL 33898 ☐ Change ☒ Addition

TITLE D
NAME GRAY, JOAN B.
STREET ADDRESS 107 MOUNTAIN LAKE
CITY-ST-ZIP LAKE WALES, FL 33898 ☐ 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:

WILLIAM G. BURNS, TREASURER 2/4/02 863-676-0550

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)