

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90101 022 ****61.25

DOCUMENT # 723514

1. Entity Name

CHATEAUX DU LAC CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O DON ASHER & ASSOCIATES INC
52 EAST SOUTH STREET
ORLANDO FL 32801
US

C/O DON ASHER & ASSOCIATES INC
52 EAST SOUTH STREET
ORLANDO FL 32801
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

59-1515897

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

WEAN & MALCHOW, PA
1301 EAST ROBINSON STREET
ORLANDO FL 32801

Name **Don Asher & Associates, Inc.**

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

52 E. South Street

City

Orlando

FL

Zip Code

32801

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

4/10/02

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 **PD** ☒ Delete
 NAME **KRISTIN, DENNIS**
 STREET ADDRESS **1500 GAY ROAD #8A**
 CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE **P/D** ☐ Change ☒ Addition
 NAME **Norm Myers**
 STREET ADDRESS **1500 Gay Road #20B**
 CITY-ST-ZIP **Winter Park, FL 32789**

TITLE **D** ☐ Delete
 NAME **CANNADY, DORIS**
 STREET ADDRESS **1500 GAY ROAD #2A**
 CITY-ST-ZIP **WINTER PARK FL 32789**

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

TITLE **D** ☐ Delete
 NAME **JOHNSON, VERONICA**
 STREET ADDRESS **1500 GAY ROAD #25A**
 CITY-ST-ZIP **WINTER PARK FL 32789**

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

TITLE **VD** ☐ Delete
 NAME **LAESSIG, MARY**
 STREET ADDRESS **1500 GAY ROAD #25D**
 CITY-ST-ZIP **WINTER PARK FL 32789**

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

TITLE **TSD** ☒ Delete
 NAME **CASE, DAN**
 STREET ADDRESS **1500 GAY ROAD #20D**
 CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE **T/D** ☐ Change ☒ Addition
 NAME **Mary Lucas**
 STREET ADDRESS **1500 Gay Road #16B**
 CITY-ST-ZIP **Winter Park, FL 32789**

TITLE **ASTD** ☒ Delete
 NAME **WEBBER, STEPHANIE**
 STREET ADDRESS **1500 GAY ROAD #22C**
 CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE **S/D** ☐ Change ☒ Addition
 NAME **Eileen Barry**
 STREET ADDRESS **1500 Gay Road #9C**
 CITY-ST-ZIP **Winter Park, FL 32789**

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 any address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)