2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N94000005653

Current Principal Place of Business:

City-St-Zip:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

ORLANDO, FL 32812

HANLON, CHUCK

PRICE, LUCEE

520 WEBSTER ST

LAKE MARY, FL 32746

3301 GUN CLUB RD

() Delete

WEST PALM BEACH, FL 33406

() Delete

Entity Name: FLORIDA LAKE MANAGEMENT SOCIETY, INC.

FILED Jan 22, 2003 Secretary of State

New Principal Place of Business:

520 WEBSTER 520 WEBSTER ST LAKE MARY, FL 327463963 US LAKE MARY, FL 327463963 US **Current Mailing Address: New Mailing Address:** PO BOX 950701 LAKE MARY, FL 327460701 FEI Number: 52-1754014 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PRICE, LUCEE 520 WÉBSTER ST LAKE MARY, FL 32746 US 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition COVENEY, MICHAEL BAIRD, RICK Name: Name: 6006 NW 44TH PLACE Address: 800 MERCY DRIVE Address: City-St-Zip: GAINESVILLE, FL 32606 City-St-Zip: ORLANDO, FL 32808 Title: Title: (X) Change () Addition () Delete BAIRD, RICK Name: PATEL, SHAILESH Name: Address: 800 MERCY DRIVE Address: 5889 AIRPORT ROAD STE 1407 City-St-Zip: ORLANDO, FL 32808 City-St-Zip: PORT ORANGE, FL 32128 Title: () Delete Title: () Change () Addition MARZOLF, ERICH Name: Name: **6233 NW 34TH DRIVE** Address: Address: City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: (X) Change () Addition Title: () Delete Title: Name: HARPER, HARVEY Name: MCCRYSTAL, JULIE 3419 TRENTWOOD DR, #102 Address: Address: 2191 SOUTH SERVICE LANE

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

LAKE BUENA VISTA, FL 32830

COVENEY, MICHAEL

6006 NW 44TH PLACE

GAINESVILLE, FL 32606

() Change () Addition

(X) Change () Addition

SIGNATURE: JULIE MCCRYSTAL T 01/22/2003

DON HICKS, C 300 S. GARDEN AVE CLEARWATER, FL 33756

LUCEE PRICE, C 520 WEBSTER ST LAKE MARY, FL 32746

SEAN MCGLYNN, C 568 BEVERLY COURT TALLAHASSEE, FL 32301

DHARMEN SETAREM, D 588 CANBY CIRCLE OCOEE, FL 34761

MICHAEL PERRY, D 107 NORTH LAKE AVENUE TAVARES, FL 32778

HARVEY HARPER, D 3419 TRENTWOOD BLVD, STE 102 ORLANDO, FL 32812

PATRICIA HARDY, D 155 E. LAKE MARY AVE LAKE MARY, FL 32746

JIM GRIFFIN, D 2379 BROAD STREET BROOKSVILLE, FL 34609

CLELL FORD, D 4505 GEORGE BLVD SEBRING, FL 33875

CARLOS FERNANDES, D 601 EAST KENNEDY BLVD TAMPA, FL 33601