

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2003 8:00 am
Secretary of State


02-21-2003 90240 026 ****61.25

DOCUMENT # N02144	
1. Entity Name LAKEVILLE VILLAGE "ON LAKE GRIFFIN" HOMEOWNERS' ASSOCIATION, INC.	

Principal Place of Business 2261 LAKESIDE DR. LEESBURG FL 34788 US	Mailing Address 2261 LAKESIDE DR. LEESBURG FL 34788 US
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2. Principal Place of Business 3340 E. Dale Street Suite, Apt. #, etc.	3. Mailing Address 3340 E. Dale Street Suite, Apt. #, etc.
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City & State Leesburg, FL 34788	City & State Leesburg, FL 34788
Zip 34788	Country Lake



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-2392774	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent HEINTZEN, PHILIP 2261 LAKESIDE DR. LEESBURG FL 34788	7. Name and Address of New Registered Agent Name Carol Hanson Street Address (P.O. Box Number is Not Acceptable) 3340 E. Dale Street City Leesburg FL Zip Code 34788
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Carol Hanson, Secretary of HOA *Carol Hanson* 2-17-03
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. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE VD NAME BALTZVD, CECILIA STREET ADDRESS 3306 E. DEOH CITY-ST-ZIP LEESBURG FL 34788 <input checked="" type="checkbox"/> Delete	TITLE 1st Vice President NAME Henry Gross STREET ADDRESS 2440 Lakeside Drive CITY-ST-ZIP Leesburg, FL 34788 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	TITLE P NAME MCNEILLY, JAMES STREET ADDRESS 3335 DALE ST CITY-ST-ZIP LEESBURG FL 34788 <input type="checkbox"/> Delete	TITLE 2nd /Vice President NAME Duane Smith STREET ADDRESS 2430 Lakeside Drive CITY-ST-ZIP Leesburg, FL 34788 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE SD NAME HANSON, CAROL STREET ADDRESS 3340 E. DALE CITY-ST-ZIP LEESBURG FL 34788 <input type="checkbox"/> Delete	TITLE Treasurer NAME Carol Kunik STREET ADDRESS 3355 Dean Street CITY-ST-ZIP Leesburg, FL 34788 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	TITLE D NAME NELSON, MARILYN STREET ADDRESS 3334 E. DALE CITY-ST-ZIP LEESBURG FL 34788 <input type="checkbox"/> Delete	TITLE Director NAME Sam Powell STREET ADDRESS 3332 E. Dale Street CITY-ST-ZIP Leesburg, FL 34788 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE TD NAME HEINTZEN, PHILIP STREET ADDRESS 2261 LAKESIDE DRIVE CITY-ST-ZIP LEESBURG FL 34788 <input checked="" type="checkbox"/> Delete	TITLE Director NAME Robert Faeges STREET ADDRESS 3366 Dean Street CITY-ST-ZIP Leesburg, FL 34788 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	TITLE D NAME COX, HEATHER STREET ADDRESS 2521 LAKESIDE CITY-ST-ZIP LEESBURG FL 34788 <input checked="" type="checkbox"/> Delete	TITLE Director NAME Arthur Wells STREET ADDRESS 3323 Dale Street CITY-ST-ZIP Leesburg, FL 34788 <input type="checkbox"/> Change <input checked="" type="checkbox"/> 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: *Carol Hanson* 2-17-03 352-787-8287

CR2E037 (10/02)