2003 NOT-FOR-PROFIT CORPORATION

Apr 17, 2003 8:00 am **UNIFORM BUSINESS REPORT (UBR)** Secretary of State DOCUMENT # 735150 04-17-2003 90214 009 ****61.25 LAKE YVETTE HOMEOWNERS' ASSOCIATION, INC. Mailing Address UUUUIUIL 96 RAYMOND RD 96 RAYMOND RD HAVANA FL 32333 HAVANA FL 32333 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 59-2951570 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required .7. Name and Address of New Registered Agent .-----6. Name and Address of Current Registered Agent CECI. MICHELLE s (P.O. Box Number is Not Acceptable) 99 HANS COURT HAVANA FL 32333 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. I am familiar with, and accept the obligations of registered agent SIGNATURE (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. VD DAVID TRANCHAND Addition TIT1 F ☐ Delete TITI F BLANTON, CHANTAL NAME NAME 28 Blue HERON POINT 466 RAYMOND RD STREET ADDRESS STREET ADDRESS HAVANA, FL. 32333 CITY-ST-ZIP HAVANA FL 32333 CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE YERKES, JOHN H NAME NAME STREET ADDRESS 97 HANS CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HAVANA FL 32333 ☐ Delete Change ☐ Addition TITLE MORNINGSTAR, DEBORAH NAME NAME STREET ADDRESS 112 BLUE HERON POINT STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP HAVANA FL 32333 ☐ Change ☐ Addition TITLE ☐ Delete TITLE SMITHWICK, DAVID NAME NAME 252 CHRISTIAN LOOP STREET ADDRESS STREET ADDRESS CITY-ST-7IP HAVANA FL 32333 CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change BURCH, JAMES NAME 61 ROZENA LOOP STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HAVANA FL 32333 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

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

O'CONNORS, LARISSA

353 CHRISTIAN LOOP

HAVANA FL 32333

☐ Delete

☐ Change

Addition

FILED