FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 91298 034 ***150.00

DOCUMENT # 194768

1. Entity Name
LAKE Palms Apts. Inc.

11023965

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Lake Palms Inc St. PETERSburg	LAKE Palms Apts INC
Suite, Apt. #, etc. 750 Burlington AV. No.	Suite, Apt. #, etc.
City & State St. Petersburg Fl	City & State St. PETERSburg Fl.
Zip 33701 Country USA	Zip 33701 Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number PN 59 0814139 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name GRACE L. Clark, SECR TREAS.

Street Address (P.O. Box Number is Not Acceptable) 750 Burlington AV NO

City St. PETERSburg, **FL** Zip Code 33701

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	TITLE	
NAME	KENNETH Pod KRASH	NAME	
STREET ADDRESS	750 Burlington AV. NO	STREET ADDRESS	
CITY-ST-ZIP	St. PETERSburg, Fl. 33701	CITY-ST-ZIP	
TITLE	V.P	TITLE	
NAME	TILLA WASCHOWITZ	NAME	
STREET ADDRESS	750 Burlington AV. NO	STREET ADDRESS	
CITY-ST-ZIP	St. PETERSburg Fl 33701	CITY-ST-ZIP	
TITLE	SEC-TR	TITLE	
NAME	GRACE CLARK	NAME	
STREET ADDRESS	750 Burlington AV NO	STREET ADDRESS	
CITY-ST-ZIP	St PETERSburg Fl. 33701	CITY-ST-ZIP	**DO NOT WRITE**
TITLE	D	TITLE	
NAME	SAUNDRA BLAIR	NAME	**IN THIS SPACE**
STREET ADDRESS	750 Burlington AV. NO	STREET ADDRESS	
CITY-ST-ZIP	St PETERSburg Fl. 33701	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	JAMES KANE	NAME	
STREET ADDRESS	750 Burlington AV. NO	STREET ADDRESS	
CITY-ST-ZIP	St. PETERSburg Fl. 33701	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	VALERIA FURMANEK	NAME	
STREET ADDRESS	750 Burlington AV. NO.	STREET ADDRESS	
CITY-ST-ZIP	St. PETERSburg Fl. 33701	CITY-ST-ZIP	

CR2E034B (12/02)

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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Grace Clark SECR. TREAS. 4-14-03 (727)898-9184
GRACE CLARK
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #