2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

DOCUMENT # 424311 Apr 19, 2000 8:00 am Secretary of State 1. Entity Name LAKE MANOR PROPERTIES, INC. 04-19-2000 90095 002 ***150.00 Principal Place of Business Mailing Address C/O ADVANTAGE PROPERTY MANAGEMENT 13827 S INDIAN RIVER DRIVE #71 JENSEN BEACH FL 34957-2241 P.O. BOX 65 JENSEN BEACH FL 34958-0065 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 59-1449330 Not Applicable Country Zip 7in \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FORTE, LORRAINE Street Address (P.O. Box Number is Not Acceptable) C/O ADVANTAGE PROPERTY MANAGEMENT 1274 N.E. BUSINESS PARK PLACE Jensen Beach FL 34957 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Change Addition TITLE ☐ Delete TITLE HUENEKE, ROBERT NAME NAME 13827 S INDIAN RIVER DR. #57 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JENSEN BCH FL 34957 Addition SD Delete Change TITLE TITLE LASHOMB, WAYAVE E. 13827 J. IRAIAN RWEL Dr# LOROUX, NORMAN NAME 13827 S. INDIAN RIVER DRIVE #45 STREET ADDRESS STREET ADDRESS JEMSEN BEACH FL CITY-ST-ZIF CITY-ST-7IP Change Addition TITLE ☐ Delete TITLE BARRETT, RICHARD NAME NAME 13827 S INDIAN RVR DR#30 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JENSEN BCH FL CITY-ST-ZIP **VPD** Delete LESTER GARRA LIVER Dr. #52 TITLE TITLE HARTMAN, HARVEY NAME NAME STREET ADDRESS STREET ADDRESS 13827 S. INDIAN RIVER DR. #33 Tensen Acach, Fl 3495, CITY-ST-ZIP CITY-ST-ZIP JENSEN BEACH FL Change Addition ☐ Delete TITLE SCARBROUGH, WARREN NAME NAME 13827 S. INDIAN RIVER DR., #61 STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP JENSEN BEACH FL ☐ Delete TITLE TITLE Ceimold, Patricia NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 reserver or sustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if