

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2002 8:00 am
Secretary of State

03-13-2002 90126 015 ***150.00

04/2001 AV

DOCUMENT # 598695

1. Entity Name
PINECREST ON LOTELA, INC.

Principal Place of Business
**2250 S. LITTLE LAKE BONNETT RD
 AVON PARK FL 33825**

Mailing Address
**2250 S LITTLE LAKE BONNETT ROAD
 AVON PARK FL 33825
 US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1870437**

Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PALMER, ROBERT P
 1957 LAKE LOTELA DRIVE
 AVON PARK FL 33825**

Name

Larry Lindemer

Street Address (P.O. Box Number is Not Acceptable)

745 Lake Lotela Dr.

City

Avon Park

FL

Zip Code
33825

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 *Larry Lindemer*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUTLER, JOSEPH 3706 VILLA BELLA DRIVE SEBRING FL 33872	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PALMER, ROBERT P 1957 LAKE LOTELA DRIVE AVON PARK FL 33825	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BOUCHARD, RICHARD 6218 MATANZAS DRIVE SEBRING FL 33872	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, RUTH 1334 LAKE LOTELA DRIVE AVON PARK FL 33825	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KELLY, JAMES W 98 LAKE SEBRING DRIVE SEBRING FL 33870	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUBRULE, PAUL 124 KAROLA DRIVE SEBRING FL 33870	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Larry Lindemer 745 Lake Lotela Dr. Avon Park 33825	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	William Brown, Treas. 105 Spring Garden Rd. Sebring, Fl. 33870	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Lon Worth Crow IV, Secretary 1347 Edgewater Point Dr. Sebring, Fl. 33870	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Charles Kozelski, Director 207 N.E. Lakeview Dr. Apt. 404 Sebring, Fl. 33870	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Charles Hansen, Director 785 E. Lake Lotela Dr. Avon Park, F. 33825	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	James Elliott, Director 1444 Golfview Dr. Avon Park, Fl. 33825	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William Hansen*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-27-02 (863) 453-7555
 Date Daytime Phone #

CR2E034 (9/01)