

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

FILED
Jan 08, 2003 8:00 am
Secretary of State

01-08-2003 90006 020 ****61.25

DOCUMENT # 717110

1. Entity Name
THE SCOTT LAKE ASSOCIATION, INC.



Principal Place of Business Mailing Address
P.O. BOX 5347 P.O. BOX 5347
LAKELAND FL 33807 LAKELAND FL 33807

40001201



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **59-2307881**

Applied For
Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NOSUN, R D
5175 TERRY LANE
LAKELAND FL 33813**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** 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

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. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME D POLLOCK, AL 2 LOMA ALTA LAKELAND FL	<input type="checkbox"/> Delete
TITLE NAME T NOSUN, R.D. 5175 TERRY LANE LAKELAND FL	<input type="checkbox"/> Delete
TITLE NAME D STERN, H.M. BLUE HERON LANE LAKELAND FL	<input checked="" type="checkbox"/> Delete
TITLE NAME P CURRY, D. 1102 LAKE POINT DRIVE LAKELAND FL	<input type="checkbox"/> Delete
TITLE NAME D HARPER, ROBERT 5508 SCOTT LAKE RD LAKELAND FL	<input type="checkbox"/> Delete
TITLE NAME D RODDA, J. 5718 COVEVIEW DRIVE LAKELAND FL	<input type="checkbox"/> Delete

TITLE NAME D Little, Bernie Luce Road Lakeland, FL 33813	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME S McConnell, Pat 5515 Scott View Lane Lakeland, FL 33813	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME D Barnett, H. 5815 Live Oak Road Lakeland, FL 33813	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	<input type="checkbox"/> Change <input 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: *Robert Rodda* 1/6/03 (863) 646-9663

CR2E037 (10/02)