

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 27, 2002 8:00 am**  
**Secretary of State**

02-27-2002 90003 036 \*\*\*\*61.25

**DOCUMENT # 722543**

1. Entity Name

**LEMON BAY CONSERVANCY, INC.**

Principal Place of Business

Mailing Address

**P O BOX 508  
 ENGLEWOOD FL 34295**

**P O BOX 508  
 ENGLEWOOD FL 34295**

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

**59-6510980**

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

**WILSON, LINDA J  
 6205 MARCUM ST  
 ENGLEWOOD FL 34224**

Name ~~HERBERT R. SMITH~~  
 Street Address (P.O. Box Number is Not Acceptable)  
**1954 SAN REMO PT. DR.**  
 City **ENGLEWOOD** FL Zip Code **34223**

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

*Herbert R. Smith* **HERBERT R. SMITH T**

**2/15/02**

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 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>BOSSMAN, BRENDA STARR</b> <b>8 AMBERJACK PLACE</b> <b>CAPE HAZE FL 33946</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>SHORT, JOHN W</b> <b>41-101 BOUNDARY BLVD</b> <b>ROTONDA WEST FL 33947</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>BAKER, CHERYL</b> <b>921 OHIO AVE</b> <b>ENGLEWOOD FL 34223</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>WILSON, LINDA J</b> <b>6205 MARCUM ST</b> <b>ENGLEWOOD FL 34224</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>HAWK, LINDA</b> <b>1671 NEW POINT COMFORT RD</b> <b>ENGLEWOOD FL 34223</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>BASS, ZOE</b> <b>6365 MANASOTA KEY RD.</b> <b>ENGLEWOOD FL</b>	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>ANDREA LIPSTEIN</b> <b>1185 SHORE VIEW DR</b> <b>ENGLEWOOD FL 34223</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>HERBERT R. SMITH</b> <b>1954 SAN REMO PT DR</b> <b>ENGLEWOOD FL 34223</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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:

*Herbert R. Smith* **HERBERT R. SMITH**

**2/15/02**

**941 4745339**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)

Attachment  
Doc# 122543 929815

Lemon Bay Conservancy, Inc.  
Officers and Directors  
Elected at the Annual Meeting on January 10, 2002

Officers:

President Brenda Bossman  
8 Amberjack Place, Cape Haze, FL 33946  
Phone 941/698-8869 e-mail president@lemonbayconservancy.org  
Pager 888/987-9455

Vice President Andrea Lipstein  
1185 Shore View Dr., Englewood 34223  
Phone 941/475-7677 e-mail lazaro23@home.com

Secretary Cheryl Baker  
921 Ohio Ave, Englewood, FL 34223  
Phone 941/475-5871 e-mail lbc@lemonbayconservancy.org

Treasurer Herb Smith  
1954 San Remo Pt. Dr., Englewood 34223  
Phone 941/474-5539 e-mail hrbjosmith@aol.com

Directors:

Three-year term (expires January 2005):

	Phone (A/C 941)	e-mail
Bunny Morse, 947 Gasparilla Blvd., Englewood 34223	475-3474	rwmorse@ewol.com
Linda Soderquist, P.O. Box 958, Englewood 34295	698-0230	
	e-mail	linda_soderquist@srqit.sarasota.k12.fl.us

Term expires January, 2004:

N. Perry Cook, 5048 Bella Terra Dr., Venice 34293	492-4665	nperry@yaho.com
*Linda Hawk, 1671 New Point Comfort Rd., Englewood, FL 34223	474-3821	Lhawk560@cs.com

Term expires January, 2003:

*Zoe Bass, 6365 Manasota Key Rd., Englewood 34223	474-4528	zoembass@ewol.com
*Art Cook, 747 N. Manasota Key, Englewood 34223 <sup>1</sup>	493-0113	dexter@d@aol.com
Tom Murtha, Fliischel Townsend & Murtha, PA, 900 East Pine St Suite 126, Englewood 34223	475-7937	tmcpa@ewol.com

\*Directors elected in previous years (directors' terms are for 3 years)

<sup>1</sup>Director Art Cook's summer replacement is

Sydney Crampton, 7765 Manasota Key Rd., Englewood 34223 Phone 941/475-5237

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Note: Lemon Bay Conservancy's Executive Director is

Carol Morrill Hartman, 745 Colgate Rd., Venice 34293  
Phone 941/493-8976 e-mail execdir@lemonbayconservancy.org