

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91470 001 ****61.25

DOCUMENT # 723806

1. Entity Name

TYMBER SKAN ON THE LAKE OWNERS ASSOCIATION, SECTION ONE, INC.

Principal Place of Business

Mailing Address

**2650 SKAN CRT
 ORLANDO FL 32839
 US**

**2650 SKAN CRT
 ORLANDO FL 32839
 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

59-1416215

Applied For

Not Applicable

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

**BECKER & POLIAKOFF, P.A.
 C/O JOHN CHRISTENSEN, ESQ.
 500 WINDERLEY PLACE, SUITE 104
 MAITLAND FL 32839**

Name **EUGENE RADICE**

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

2273 BLUE SAPPHIRE CIRCLE

City

ORLANDO

FL

Zip Code

32837

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

Eugene Radice, President 4/15/02

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 **D** ☐ Delete
 NAME **SHONTERE, RICHARD**
 STREET ADDRESS **1427 E HILLSBORO BV 229**
 CITY-ST-ZIP **DEERFIELD BEACH FL 33441**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **ST** ☐ Delete
 NAME **VAZQUEZ, JOSE**
 STREET ADDRESS **4618 GREEN GLEN CT**
 CITY-ST-ZIP **ORLANDO FL 32839**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☒ Delete
 NAME **BOLING, MARSHA**
 STREET ADDRESS **414 S KENILWORTH**
 CITY-ST-ZIP **OAK PARK IL 60302**

TITLE **D** ☐ Change ☒ Addition
 NAME **DESSELLE EILEEN**
 STREET ADDRESS **869 Spanish Drive North**
 CITY-ST-ZIP **Longboat Key, FL 34228**

TITLE **VP** ☐ Delete
 NAME **HAAS, FREDRICK C**
 STREET ADDRESS **2700 HARBOUR TOWN RD**
 CITY-ST-ZIP **MERRITT ISLAND FL 32952**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **TENDLER, CINDY**
 STREET ADDRESS **2917 TIMBERLAKE DR**
 CITY-ST-ZIP **ORLANDO FL 32806**

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **869 Spanish Drive North**
 CITY-ST-ZIP **Longboat Key, FL 34228**

TITLE **P** ☐ Delete
 NAME **RADICE, EUGENE**
 STREET ADDRESS **2273 BLUE SAPPHIRE CIRCLE**
 CITY-ST-ZIP **ORLANDO FL 32837**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/15/02 (407) 841-6999

CR2E037 (9/01)

attachment # 723806 948700

**TYMBER SKAN ON THE LAKE OWNERS ASSOCIATION
SECTION ONE, INC.**

2650 SKAN COURT, ORLANDO, FLORIDA 32839
PHONE: (407) 841-6999 FAX: (407) 841-9080

2002 UBR

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Block 11

Title	D	Addition
Name	ALBRIGHT RONALD	
Address	1932 Palm Vista Dr	
	Apopka, Fl 32712	