2002 UNIFORM BUSINESS REPORT (UBR)

Apr 11, 2002 8:00 am § Secretary of State **DOCUMENT # 723842** 1. Entity Name 04-11-2002 90031 009 ****61.25 LAKESIDE MANOR NORTHEAST ASSOCIATION, INC Principal Place of Business Mailing Address 9365 W SAMPLE ROAD 5850-NW-17TH-PLACE-D-100 SUNDISE FL 33313 SUITE 203 CORAL SPRINGS FL 33065 2. Principal Place of Business 3. Mailing Address 9365 W. SAMPLE ROAD Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. SUITE 203 Applied For City & State City & State 4. FEI Number 59-1497978 Not Applicable CORAL SPRINGS Zip Country \$8.75 Additional 5. Certificate of Status Desired 33065 Fee Required us 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -Name - ----Street Address (P.O. Box Number is Not Acceptable) SAATHOFF, NANCY 9365 W SAMPLE RD #203A Zip Code City CORAL SPRINGS FL 33065 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Pavable to **\$5.00** May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. PD TITLE ☐ Change ☐ Addition (9/01 ☐ Delete TITLE NAME CARTER, IAN NAME STREET ADDRESS STREET ADDRESS 9365 W SAMPLE RD CITY-ST-ZIP CITY-ST-ZIP **CORAL SPRINGS FL** ☐ Delete ☐ Addition TITLE ☐ Change TITLE NAME NAME MILLER, CARMEN STREET ADDRESS STREET ADDRESS 9365 W SAMPLE RD CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL ☐ Change ☐ Addition TITLE ☐ Delete NAME WEISS, PAUL STREET ADDRESS STREET ADDRESS 9365 W SAMPLE RD CITY-ST-ZIP CITY-ST-ZIP **CORAL SPRINGS FL** ☐ Change Addition TITLE Delete TITLE NAME RUSSELL, FELICIA NAME GREENE, RANDELL 9365 W. SAMPLE NUAB #203 STREET ADDRESS STREET ADDRESS 9365 W SAMPLE RD CONAL SPRINGS, FL 33065 CITY-ST-ZIP CITY-ST-7IP CORAL SPRINGS FL ☐ Delete TITLE ☐ Change Addition TITLE NAME ALEXANDER, ALLYDAY 9365 W. SAMPLE ROAD #203 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CORAL SPRINGS, FL 33065 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filling 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:

954-752-4796