

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

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90150 026 ****61.25

DOCUMENT # 728717

1. Entity Name

CRENSHAW LAKE IMPROVEMENT ASSOCIATION, INC.



Principal Place of Business

**3624 CRENSHAW LAKE ROAD
LUTZ FL 33548**

Mailing Address

**3624 CRENSHAW LAKE ROAD
LUTZ FL 33548**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2760528**

Applied For

Not Applicable

Zip **33548**

Country **USA**

Zip **33548**

Country **USA**

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

HEYCK, JOSEPH G JR.

SUITE 1240 BANK OF AMERICA PLAZA

101 E. KENNEDY BLVD.

TAMPA FL 33602

Name

JOSEPH G. HEYCK, JR.

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

202 S. ROME AVE. SUITE 100

City

TAMPA

FL

Zip Code

33606

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 **D** ☒ Delete
NAME **ATCHISON, CAROL**
STREET ADDRESS **1804 VAN DYKE RD**
CITY-ST-ZIP **LUTZ FL**

TITLE **D** ☐ Change ☒ Addition
NAME **JONES, CHARLES L.**
STREET ADDRESS **3603 LITTLE RD.**
CITY-ST-ZIP **LUTZ, FL 33548**

TITLE **STD** ☐ Delete
NAME **SHELL, HENRY**
STREET ADDRESS **1309 N FLORIDA AVENUE**
CITY-ST-ZIP **TAMPA, FL 00000**

TITLE ☐ Change ☐ Addition
NAME **33602**
STREET ADDRESS
CITY-ST-ZIP

TITLE **VD** ☐ Delete
NAME **HOLMES, MARY**
STREET ADDRESS **CRENSHAW LAKE RD 3612**
CITY-ST-ZIP **LUTZ FL**

TITLE ☐ Change ☐ Addition
NAME **33548**
STREET ADDRESS
CITY-ST-ZIP

TITLE **PD** ☐ Delete
NAME **HEYCK, JOSEPH G**
STREET ADDRESS **CRENSHAW LAKE RD. 3624**
CITY-ST-ZIP **LUTZ, FL 00000**

TITLE ☐ Change ☐ Addition
NAME **33548**
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **HEYCK, MARILYN G**
STREET ADDRESS **CRENSHAW LAKE RD. 3624**
CITY-ST-ZIP **LUTZ FL**

TITLE ☐ Change ☐ Addition
NAME **33548**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

JOSEPH G. HEYCK, JR.

1/13/03 (813) 223-5357

CR2E037 (10/02)