

2002 UNIFORM BUSINESS REPORT (UBR)

3/2'

FILED
Apr 24, 2002 8:00 am
Secretary of State

03-27-2002 90043 010 ****61.25

DOCUMENT # 730117

1. Entity Name

SKY LAKE SOUTH HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business

100 E. SYBELIA AVENUE
 130
 MAITLAND FL 32751
 US

Mailing Address

100 E. SYBELIA AVENUE
 130
 MAITLAND FL 32751
 US

2. Principal Place of Business

11102 Stone Gate Ct

Suite, Apt. #, etc.

3. Mailing Address

11102 Stone Gate Ct

Suite, Apt. #, etc.

City & State

Orlando FL

City & State

Orlando FL 32837

4. FEI Number

59-1690441

Applied For

Not Applicable

Zip

32837

Country

US

Zip

32837

Country

US

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KIEBZAK, KEITH R
C/O KL MANAGEMENT GROUP, INC.
100 E. SYBELIA AVENUE, SUITE 130
MAITLAND FL 32751

7. Name and Address of New Registered Agent

Name **Mary Guillen**
 Street Address (P.O. Box Number is Not Acceptable)
11102 Stone Gate Ct
 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 **Mary Guillen Corp. Secretary** *Mary Guillen* **3/11/02**
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

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	FULKERSON, RENE'	
STREET ADDRESS	100 E. SYBELIA AVENUE, SUITE 130	
CITY-ST-ZIP	MAITLAND FL 32751	
TITLE	OTD	<input checked="" type="checkbox"/> Delete
NAME	O'ROURKE, ILLEAN	
STREET ADDRESS	100 E. SYBELIA AVENUE, SUITE 130	
CITY-ST-ZIP	MAITLAND FL 32751	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	PORRITT, JOHN	
STREET ADDRESS	100 E. SYBELIA AVENUE, SUITE 130	
CITY-ST-ZIP	MAITLAND FL 32751	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	David Penn	
STREET ADDRESS	11315 Zodiac Dr	
CITY-ST-ZIP	Orlando FL 32837	
TITLE	VP/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Charlie Adams	
STREET ADDRESS	2874 Milstead St	
CITY-ST-ZIP	Orlando FL 32837	
TITLE	S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Mary Guillen	
STREET ADDRESS	11102 Stone Gate Ct	
CITY-ST-ZIP	Orlando FL 32837	
TITLE	T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Lenie Barrett	
STREET ADDRESS	11323 Inwood Ct	
CITY-ST-ZIP	Orlando FL 32837	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Hubert Bonnett	
STREET ADDRESS	11123 Paddington Way	
CITY-ST-ZIP	Orlando FL 32837	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Edwin Marrero	
STREET ADDRESS	11351 Aries Dr	
CITY-ST-ZIP	Orlando FL 32837	

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 *Mary Guillen* **SECRETARY**

3.11.02 407.240.7222

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)