

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

FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90310 034 ****61.25

DOCUMENT # 730954

1. Entity Name
LAKE SHARON INCORPORATED



Principal Place of Business
**#1 KATHY LANE
LAKE SHARON ESTATES
FREEPORT FL 32439-6730**

Mailing Address
**#1 KATHY LANE
LAKE SHARON ESTATES
FREEPORT FL 32439-6730**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1576735**

Applied For
 Not Applicable

Zip Country Zip Country

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

**OWCZARSKI, GREGG
107 KATHY LANE E.
FREEPORT FL 32439**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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: **PRESIDENT** DATE: **Jan 29, 2003**

Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PD	OWCZARSKI, GREGG	107 KATHY LANE E.	FREEPORT FL 32439				
VD	MERKEL, CHUCK E JR.	23 KATHY LANE E.	FREEPORT FL 32439	VD	LARRY MCCORMICK	159 KATHY LANE EAST	FREEPORT FL 32439
TD	ROBERSON, ANNE	62 PETERS COURT	FREEPORT FL 32439				
SD	MESSER, JEWEL	88 KATHY LANE E	FREEPORT FL 32439				
D	PIERCE, CLYDE	102 DARRELL COURT	FREEPORT FL 32439				
D	MITCHELL, JOHN	21 GNE COURT W.	FREEPORT FL 32439				

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 REQUIRED** **ANNE ROBERSON, TD 1/30/03 (850) 897-4695**

CR2E037 (10/02)