

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

FILED
Apr 04, 2003 8:00 am
Secretary of State

04-04-2003 90081 020 ****61.25

DOCUMENT # 733235

1. Entity Name
LAKE CONWAY EAST HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

**5909 COVE DR
ORLANDO FL 32812
US**

Mailing Address

**P O BOX 622662
ORLANDO FL 32862
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 **59-1610427**

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

**HASLEY, GERALDINE M.
3817 QUANDO DRIVE
ORLANDO FL 32812**

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

*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 NAME STREET ADDRESS CITY-ST-ZIP	PD ROLLMAN, LEO 5909 COVE DR ORLANDO FL 32812	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MARTIN, SARA 4226 QUANDRO DR ORLANDO FL 32812	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GUCUA, GARRY 3613 QUANDO DR ORLANDO FL 32812	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FRENCH, ALICE 3814 QUANDO DR ORLANDO FL 32812	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BARTOS, BRETT 3600 QUANDO DRIVE ORLANDO FL 32812	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SO MOORE, MELONEZE 4513 KANDRA COURT ORLANDO FL 32812	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BAIL, BARBARA 4233 KANDRA COURT ORLANDO FL 32812	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: **BRETT BARTOS**

3/23/03

(407) 858-1331

CR2E037 (10/02)