

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2002 8:00 am
Secretary of State

02-26-2002 90128 021 ****61.25

DOCUMENT # 749786

1. Entity Name

PALM LAKE ESTATES RESIDENT ASSOCIATION, INCORPORATED

Principal Place of Business

**808 53RD AVE. E.
 BRADENTON FL 34203**

Mailing Address

**808 53RD AVE. E.
 LOT 154
 BRADENTON FL 34203
 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

59-2371790

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

**LONG, LILLIAN
 808 53 AVENUE E
 60B
 BRADENTON FL 34203**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-7-02

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **S** ☒ Delete
 NAME **BASINGER, ELIZABETH F**
 STREET ADDRESS **808 53RD AVE. E. 109C**
 CITY-ST-ZIP **BRADENTON FL 34203**

TITLE **S.** ☒ Change ☐ Addition
 NAME **Gawany, Carol J.**
 STREET ADDRESS **808 53rd Ave. E. I 202**
 CITY-ST-ZIP **Bradenton, FL 34203**

TITLE **T.** ☐ Delete
 NAME **COE, JOHN E**
 STREET ADDRESS **808 53RD AVE E 24A**
 CITY-ST-ZIP **BRADENTON FL 34203**

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

TITLE **P** ☐ Delete
 NAME **LONG, LILLIAN**
 STREET ADDRESS **808 53RD AVE E 60B**
 CITY-ST-ZIP **BRADENTON FL 34203**

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

TITLE **VP** ☒ Delete
 NAME **LAMB, DONALD**
 STREET ADDRESS **808 53RD AVE E 81C**
 CITY-ST-ZIP **BRADENTON FL 34203**

TITLE **VICE PRES** ☒ Change ☐ Addition
 NAME **Whitby, BILL 78B**
 STREET ADDRESS **808 53 AVE. E BRADENTON FL**
 CITY-ST-ZIP **34203**

TITLE **D** ☐ Delete
 NAME **KELLER, PATRICA**
 STREET ADDRESS **808 53RD AVE. 160J**
 CITY-ST-ZIP **BRADENTON FL 34203**

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

TITLE **D** ☒ Delete
 NAME **LONGWELL, DOROTHY**
 STREET ADDRESS **808 53 AVE E 279A**
 CITY-ST-ZIP **BRADENTON FL 34203**

TITLE **D** ☒ Change ☐ Addition
 NAME **FELIX, MARY LOU**
 STREET ADDRESS **808 53 AVE E**
 CITY-ST-ZIP **BRADENTON FL 34203 7913**

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lillian M. Long 2-7-02

Date

Daytime Phone #

CR2E037 (9/01)