## FILED 2001 UNIFORM BUSINESS REPORT (UBR) Sep 12, 2001 8:00 am Secretary of State **DOCUMENT # 750443** 1. Entity Name 09-12-2001 90035 015 \*\*\*\*61.25 TWIN LAKES PROPERTY OWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 39 TWIN LAKE PID 39 TWIN LAKE RD LAKE PLACID FL 33852 LAKE PLACID FL 33852 2. Principal Place of Business 3. Mailing Address 500 LAKE FRANCIS 500 LAKE FRANCIS RD Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEi Number Applied For 59-2762281 AKE PLACID FLA AKE RACID Not Applicable Country \$8.75 Additional 5.\_Certificate of Status Desired VIGNLANDS NIGHLANDS Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BALLAS Street Address (P.O. Box Number is Not Acceptable) KUREK. DIANNÉ 39 TWIN LAKES RD LAKE PLACID FL 33852 39852 ubmits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to After September 12, 2001, min. will be \$236.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. VD DRESIDENT TITI F Delete (5/01)LOW FLL BALLAS ☐ Change Addition CONNELL, ROBERT NAME NAME SOG LAKE FRANCIS STREET ADDRESS **40 TWIN LAKES RD** STREET ADDRESS CITY-ST-ZIE LAKE PLACID FL 33852 CJTY-ST-ZIE LAKE PLACID, FLA 23852 SD PRESIDENT TITLE VICE Delete TITLE ☐ Change 4 Addition BRAD KINGGARD CONNELL, NANCY NAME NAME DRIVE 159 LAKE FRANCIS STREET ADDRESS 40 TWIN LAKES RD STREET ADDRESS CITY-ST-ZIP CÎTY-ST-ZIP LAKE PLACID FL 33852 PLACID I-LA, 33852 LAKE TD TITLE ☐ Delete TITLE ☐ Change ☐ Addition FALVEY, MILLICENT NAME NAME STREET ADDRESS 154 LAKE FRANCIS DRIVE STREET ADDRESS CITY-ST-ZIP LAKE PLACID, FL 00000 CITY-ST-7/P SECRETARY TITLE ✓ Delete TITLE Addition SHEILA SHITH 129 LAKE FRANCES DRIVE KUREK, DIANNA NAME NAME STREET ADDRESS 39 TWIN LAKES RD STREET ADDRESS LAKE PLACID, FLA, 33859 CITY-ST-ZIE LAKE PLACID FL 33852 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

mation 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 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 converse of powered to execute this report as reported by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if I hereby certify that the info indicated on this report or of the corporation or the r changed, or on an attach

CITY-ST-ZIP

SIGNATURE