

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

FILED
Mar 10, 2003 8:00 am
Secretary of State

02-25-2003 90135 004 ***61.25

DOCUMENT # 750447

1. Entity Name

SYLVAN SHORES HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

P.O. BOX 1343
LAKE PLACID FL 33862

Mailing Address

P.O. BOX 1343
LAKE PLACID FL 33862

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2277185**

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

GARDNER, FRANK
1802 SYLVIA STREET
LAKE PLACID FL 33852

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
P
WISEMAN, CHARLES ☐ Delete
1838 FIFTH ST.
LAKE PLACID FL 33852

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
GARDNER, FRANK ☐ Change ☐ Addition
1802 SYLVIA STREET
LAKE PLACID, FL ←

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
BENNETT, STEVE ☒ Delete
1807 THIRD ST
LAKE PLACID FL 33852

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
PAULA RAFALEWSKI ☒ Change ☐ Addition
1615 FIRST ST.
LAKE PLACID, FL 33852

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
LUSK, MYRTLE ☐ Delete
1842 FIFTH STREET
LAKE PLACID FL

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GADSON, LEE ☒ Delete
1603 FIRST ST
LAKE PLACID FL 33852

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
JOHN YANNUZZI ☒ Change ☐ Addition
1635 FIFTH ST.
LAKE PLACID, FL 33852

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
OSTENDORF, JOHN ☐ Delete
1842 FIFTH ST
LAKE PLACID FL 33852

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DENEBY, BILL ☐ Delete
1801 LAKE CLAY DRIVE
LAKE PLACID FL 33852

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)(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

GARDNER

2/19/03

863-465-7467

Date

Daytime Phone

CR2E037 (10/02)