## 2000 UNIFORM BUSINESS REPORT (UBR)

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## FILED **DOCUMENT # 751661** Mar 10, 2000 8:00 am 1. Entity Name Secretary of State LONE PINE WEST MOBILE PARK HOME OWNERS ASSOCIATI 03-10-2000 90023 001 \*\*\*\*61.25 Mailing Address Principal Place of Business 183 LONE PINE JERR JOS LONE PINE JERRY PEMBROKE PARK FL 33009 PEMBROKE PARK FL 33009-6063 2. Principal Place of Business 3. Mailing Address PINE 31 LONE 131 LONE Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-2051062 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LAMBERT, MADELINE 133 TERR LONE PINE WEST PEMBROKE PARK FL 33009 33009 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 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be $\Box$ 'Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change Addition TITLE -BOUTHILLIER ANDRÉ LAPIERRE, ROLLAND NAME NAME **402 LANE** STREET ADDRESS **224 LANE** STREET ADDRESS CITY-ST-ZIP PEMBROOKE PARK, FL 33009 CITY-ST-ZIP PEMBROKE PARK FL 33009 Addition Change TITLE TITLE HENRICH CLAUDETTE DESJARDINS, LYSE NAME STREET ADDRESS STREET ADDRESS 131 DRIVE **126 TERR** CITY-ST-ZIP CITY-ST-ZIP PEMBROKE PARK FL 33009 PEMBROOKE PARK, FL 33009 Change Addition TITLE TITLE GENDRON GILLES DELAFONTAINE, JENNINE NAME NAME STREET ADDRESS 138 TERRACE STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP PEMBROOKE PARK, FL 33009 PEMBROKE PARK FL 33009 Delete Addition ☐ Change TITLE TITI F LAPIERRE ROLLAND LAMBERT, MADELEINE NAME NAME **224 LANE** STREET ADDRESS STREET ADDRESS 133 LONG PINE TERR CITY-ST-ZIP CITY-ST-ZIP HALLANDALE FL 33009 PEMBROOKE PARK, FLA 33009 Delete ☐ Change Addition TITLE **DURIVAGE LILLIANNE** NAME FISHER, ADA NAME STREET ADDRESS , 410 LANE STREET ADDRESS 338 LONE PINE LN 🛝 CITY-ST-ZIP CITY-ST-7IP HALLANDALE FL 33009 PEMBROOKE PARK, FLA 33009 **Addition** Change TITLE TREMBLAY, YVON NAME LAMBERT MADELEINE STREET ADDRESS STREET ADDRESS 206 LONE PINE LN 133 TERRACE CITY-ST-ZIP CITY-ST-ZIP HALLANDALE FL 33009 PEMBROOKE PARK, FLA 33009 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.