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

DOCUMENT # 759051

1. Entity Name

CITY-ST-ZIP

SIGNATURE:

SEMINOLE FL 33772

THE VILLAGE ON LAKE SEMINOLE CONDOMINIUM ASSOCIA TION, INC.

Principal Place of Business 95 CENTRAL AVENUE JUITE 100 IT PETERSBURG FL 33701 2. Principal Place of Business		Mailing Address 695 CENTRAL AVENUE SUITE 100 ST PETERSBURG FL 33701 3. Mailing Address						
Suite, Apt. #		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State		City & State	City & State		4. FEI Number 59-2297168 Applied For			
Zip Country		Zip	Zip Country		5. Certificate of Status Desired Sa.75 Additional Fee Required			
	6. Name and Address of Curre	nt Registered Agent		7. Name and Addr	ess of New Registered Ag			
ST PETER	ral avenue, ste 100 'Sburg Fl 33701	t for the purpose of changing it	City	Street Address (P.O. Box Number is Not Acceptable)				
the obligations the street the st	ons of registered agent. Signature, typed or printed name of registered agent.	ent and title if applicable. (NC	oTE: Registered Agent signature ampaign Financing Contribution.	\$5.00 May Be Added to Fees	Make Check Florida Departn	Payable t	to itate	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGE	S TO OFFICERS AND DIRE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP REES, RICHARD 10500 VILLAGE DR 203E SEMINOLE FL 34642	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			} Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOORE, TERRY 10500 VILLAGE DR., #201 E SEMINOLE FL 33772	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
	D WARGO, GARY 10500 VILLAE DR, 102E SEMINOLE FL 33772	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WRYNN, JANE 10400 VILLAGE DRIVE 202 F SEMINOLE FL 33772	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HUGHES, GRACE 10450 VILLAGE DRIVE #203C SEMINOLE FL 33772	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME	D ARNOLD, ORTON 10600 VILLAGE DR 103D	☐ Delete	TITLE NAME STREET ADDRESS			☐ Change	☐ Addition	

CITY-ST-ZIP

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.

FILED Feb 13, 2003 8:00 am Secretary of State

