

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 759244

1. Entity Name

LAKE SEMINOLE VILLAGE HOMEOWNERS ASSOCIATION, IN

Principal Place of Business

Mailing Address

C/O INFINITI PROPERTY MANAGEMENT INC
1301 SEMINOLE BLVD STE 110
LARGO FL 33770
US

C/O INFINITI PROPERTY MANAGEMENT INC
1301 SEMINOLE BLVD. SUITE 110
LARGO FL 33770-8124
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

59-2262433

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

INFINITI PROPERTY MANAGEMENT
1301 SEMINOLE BOULEVARD
STE 110
LARGO FL 33770

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

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 PD ☐ Delete
NAME DELK, JOE
STREET ADDRESS 9790 LAKE SEMINOLE DR. E.
CITY-ST-ZIP SEMINOLE FL 33773

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

TITLE VD ☐ Delete
NAME MOORS, JERILYN
STREET ADDRESS 9721 LAKE SEMINOLE DR. E
CITY-ST-ZIP SEMINOLE FL 33773

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

TITLE TD ☒ Delete
NAME KRISTALL, PETER
STREET ADDRESS 9912 LAKE SEMINOLE DR W
CITY-ST-ZIP SEMINOLE FL

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

TITLE SD ☒ Delete
NAME TREHY, ELAINE
STREET ADDRESS 10300-A 97TH ST N
CITY-ST-ZIP SEMINOLE FL 33773

TITLE S/D ☐ Change ☒ Addition
NAME WHITLEY, MARY
STREET ADDRESS 9676 LAKE SEMINOLE DR. E.
CITY-ST-ZIP SEMINOLE, FL 33773

TITLE D ☐ Delete
NAME JONES, NORMAN
STREET ADDRESS 10434 98TH ST N
CITY-ST-ZIP SEMINOLE FL 33773

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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.

SIGNATURE:

SIG Joe Delk Joe Delk
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-22-00

(787) 585-3491

Date

Daytime Phone #

CR2E037 (9/99)