2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2001 8:00 am
Secretary of State
04-25-2001 90170 005 ****61.25

DOCUMENT # 761455

1. Entity Name

LAKESHORE AT UNIVERSITY PARK SECTION ONE ASSOCIA

Principal Place of Business	Mailing Address
2421 S.W. 127TH AVENUE DAVIE FL 33325 US	2421 S.W. 127TH AVENUE DAVIE FL 33325 US

DO NOT WRITE IN THIS SPACE

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 59-2169858 ☐ 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
MIELE BROS. MANAGEMENT INC. 2421 S.W. 127TH AVENUE STE 300 DAVIE FL 33325	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WEIR, MARY K 8730 SHERMAN CIR, N, #201 MIRAMAR FL 33025	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Lopez, Leo 8710 N. Sherman Cir. #107 Miramar FL 33025	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ALEXANDER, LYLE C 8740 N SHERMAN CR #301 MIRAMAR FL 33025	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Alexander, LYLE C 8740 N Sherman Cir. #301 Miramar FL 33025	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD DAVIS, CYNTHIA 8720 SHERMAN CR N., #102 MIRAMAR FL 33025	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Davis, Cynthia 8720 N. Sherman Cir. #102 Miramar FL 33025	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Bavaro-Hopkins, Lana 8700 N. Sherman Cir. #103 Miramar, FL 33025	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: Lana Bavaro Hopkins 4/18/01 (954)4736285
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #