

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 07, 2002 8:00 am**  
**Secretary of State**

02-19-2002 90117 012 \*\*\*\*61.25

**DOCUMENT # 762123**

1. Entity Name

COUNTRY CLUB MOBILE HOME OWNERS FEDERATION, INC.

*NIC Not Filed*  
*Am*

Principal Place of Business

2801 NW 30TH COURT  
 OAKLAND PARK FL 33311  
 US

Mailing Address

2801 NW 30TH COURT  
 OAKLAND PARK FL 33311  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0078928**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

GALPEAULT, LUCIEN  
 3024 N.W. 28TH TERRACE  
 OAKLAND PARK  
 FORT LAUDERDALE FL 33311

Name **REJEAN CHARLEBOIS**

Street Address (P.O. Box Number is Not Acceptable)  
**2801 N.W. 30TH COURT**

**OAKLAND PARK**

City **FLORIDA**

**FL**

Zip Code **33311**

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 *REJEAN CHARLEBOIS* *1/10/2002*  
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

TITLE	VO	<input checked="" type="checkbox"/> Delete
NAME	LEGAUST, ANDRE	
STREET ADDRESS	3007 N.W. 28TH LANE	
CITY-ST-ZIP	OAKLAND PARK FL 33311	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	KATTE, LORRAINE M	
STREET ADDRESS	2784 N.W. 29TH STREET	
CITY-ST-ZIP	OAKLAND PARK FL 33311	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	BOND, DENISE	
STREET ADDRESS	2783 N.W. 29TH STREET	
CITY-ST-ZIP	OAKLAND PARK FL 33311	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PATENAUDE, PIERRETTE	
STREET ADDRESS	2443 N.W. 28TH TERRACE	
CITY-ST-ZIP	OAKLAND PARK FL 33311	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	CHAMBERLAIN, ARTHUR	
STREET ADDRESS	3031 NW 28TH LANE	
CITY-ST-ZIP	OAKLAND PARK F; 33311	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MELE, TERRY	
STREET ADDRESS	2792 N.W. 29TH STREET	
CITY-ST-ZIP	OAKLAND PARK FL 33311	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEGALT, ANDRE	
STREET ADDRESS	3007 N.W. 28TH LANE	
CITY-ST-ZIP	OAKLAND PARK FL 33311	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GALPEAULT, LUCIEN	
STREET ADDRESS	3024 N.W. 28TH TERRACE	
CITY-ST-ZIP	OAKLAND PARK FL 33311	
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LACHANCE, FERNANDO	
STREET ADDRESS	2783 N.W. 29TH STREET	
CITY-ST-ZIP	OAKLAND PARK FL 33311	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MATTE, LORRAINE	
STREET ADDRESS	2764 N.W. 29TH STREET	
CITY-ST-ZIP	OAKLAND PARK FL 33311	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SCHAEFER, HERMANN	
STREET ADDRESS	3028 LANE 28TH N.W.	
CITY-ST-ZIP	OAKLAND PARK FL 33311	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HATEM KHABBAZ	
STREET ADDRESS	3002 28TH WAY	
CITY-ST-ZIP	OAKLAND PARK FL 33311	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 *Fernando Lachance* *01/02/02* *485-7980*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)