

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 766780

1. Entity Name

LAKE WEIR GARDENS PROPERTY OWNERS ASSOCIATION, I

Principal Place of Business

11893 SE 74TH TERR
P. O. BOX 2232
BELLEVUE FL 34420

Mailing Address

P.O. BOX 2232
BELLEVUE FL 34420
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ALLEMEIER, BETTY J
11893 S.E. 74TH TERR.
BELLEVUE FL 34420

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

Betty J. Allemeier

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-9-01

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
P
VOSKI, JOE
12106 SE 72 TERRACE ROAD
BELLEVUE FL 34420 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVP
MESSNER, ARLENE
11705 SE 72 CT RD
BELLEVUE FL 34420 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
RIESEN, ERNEST
11835 SE 70TH AVENUE RD
BELLEVUE FL 34420 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TREASURER
MEEHAN, RAYETTA
11907 SE 74 TERR RD
BELLEVUE, FL 34420 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
ALLEMEIER, BETTY
11893 SE 74 TERRACE
BELLEVUE FL 34420 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ALLEMEIER, HAROLD
11893 SE 74 TERR
BELLEVUE FL 34420 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
COWAN, ROBERT
12146 SE 74 TERR
BELLEVUE FL 34420 ☐ Delete

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

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:

Betty J. Allemeier
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-9-01 352-245-0893

FILED
Feb 21, 2001 8:00 am
Secretary of State

02-21-2001 90030 037 *****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)