

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 16, 2001 8:00 am
Secretary of State
03-16-2001 90052 050 ***150.00

DOCUMENT # 816013

1. Entity Name
LEE ACRES CORPORATION

Principal Place of Business

**13672 BRAMLEY PT. DR.
JACKSONVILLE FL 32225
US**

Mailing Address

**13672 BRAMLEY PT. DR.
JACKSONVILLE FL 32225
US**

2. Principal Place of Business

13672 Bramley Pt Dr
Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **38-1720989**

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

**MUSHO, DAVID
1015 CICERO LANE
BRANDON FL 33511**

7. Name and Address of New Registered Agent

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **P**
OUELLETE, ROBERT
STREET ADDRESS **7571 MEADOW CT.**
CITY-ST-ZIP **DUBLIN CA 94568**

TITLE ☐ Delete
NAME **T**
KALAYNACH, MICHAEL
STREET ADDRESS **3825 22ND STREET**
CITY-ST-ZIP **WYANDOTTE MI**

TITLE ☐ Delete
NAME **SM**
OUELLETTE, GLORIA
STREET ADDRESS **7571 MEADOW CT.**
CITY-ST-ZIP **DUBLIN CA 94568**

TITLE ☐ Delete
NAME **D**
WARGO, MICHAEL
STREET ADDRESS **4402 BUCKINGHAM**
CITY-ST-ZIP **ROYAL OAK MI 94568**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **13672 Bramley Point Dr**
CITY-ST-ZIP **Jacksonville, FL 32225**

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

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **13672 Bramley Point Dr**
CITY-ST-ZIP **Jacksonville FL 32225**

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

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

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Gloria Ouellette
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gloria Ouellette - secretary

3/15/01

904-220-2607

Date

Daytime Phone #

CR2E034 (10/00)