

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90186 013 ***150.00

DOCUMENT # **95000002239**

1. Entity Name

LZB FLORIDA REALTY, INC.

Principal Place of Business

Mailing Address

1284 N. TELEGRAPH RD
 MONROE MI 48162

1284 N. TELEGRAPH RD
 MONROE MI 48162

2. Principal Place of Business
 1284 N. TELEGRAPH RD

3. Mailing Address
 1284 N. TELEGRAPH RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
 MONROE MI

City & State
 MONROE MI

4. FEI Number

38-3235942

Applied For

Not Applicable

Zip
 48162

Country
 USA

Zip
 48162

Country
 USA

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

C T CORPORATION
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP
PRESIDENT
KISER, GERALD L
1505 HOLLYWOOD DR
MONROE MI 48162

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP
DIRECTOR
NORTON, PATRICK H
5500 RAVEN PKY
MONROE MI 48161

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP
TREASURER
JOHN W. BARBER
7612 NOTTINGHAM
LAMBERTVILLE MI 48144

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP
SECRETARY
JAMES P. KLARR
29296 EAST RIVER RD.
GROSS ILE MI 48138

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

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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: 

SECRETARY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

734-242-1444

Daytime Phone #