

FILED  
May 14, 2002 8:00 am  
Secretary of State

05-14-2002 90071 006 \*\*\*150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J63850

1. Entity Name

LINCOLN COMMERCIAL PROPERTIES, INC.

Principal Place of Business

LINCOLN COMMERCIAL  
P.O. BOX 916464  
LONGWOOD FL 32791  
US

Mailing Address

LINCOLN COMMERCIAL  
P.O. BOX 916464  
LONGWOOD FL 32791  
US

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

59-2805831

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

JOHNSON, LYDER

2648 W. STATE RD 434

SUITE B

LONGWOOD FL 32779

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, 2002 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 PT  
NAME JOHNSON, LYDER  
STREET ADDRESS 2648 W. STATE RD. 434, STE. B  
CITY-ST-ZIP LONGWOOD FL ☐ Delete

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

TITLE VS  
NAME JOHNSON, SIMONE S.  
STREET ADDRESS 2648 W. STATE RD. 434, STE. B  
CITY-ST-ZIP LONGWOOD FL ☐ Delete

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

TITLE AS  
NAME JOHNSON, TERRY B.  
STREET ADDRESS 2648 W. STATE RD. 434, STE. B  
CITY-ST-ZIP LONGWOOD FL ☐ Delete

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

TITLE VP  
NAME JOHNSON, TERRY B.  
STREET ADDRESS 2648 W. STATE RD. 434, STE. B  
CITY-ST-ZIP LONGWOOD FL ☐ Delete

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

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption 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:

*Lyder R. Johnson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/02  
Date

407-562-9990  
Daytime Phone #

CR2E034 (9/01)