

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M87275

1. Entity Name

FIRST AMERICAN PROPERTIES LAKELAND CORPORATION

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90343 042 ***150.00

Principal Place of Business

1501 SHEPHERD RD STE 5
P O BOX 6271
LAKELAND FL 33811
US

Mailing Address

PO BOX 6271
LAKELAND FL 33807-6271
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 **59-2896341**

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

PARKS, JOHN PAUL
C/O WENDEL & CHRITTON, CHARTERED
5300 SOUTH FLORIDA AVE.
LAKELAND FL 33813

Name

Carlton D. Hodges

Street Address (P.O. Box Number is Not Acceptable)

1501 Shepherd Rd, #5

City

Lakeland

Zip Code

33860

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 on file if applicable.

Carlton D. Hodges

4/20/01

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 DP ☐ Delete
NAME HODGES, CARLTON D.
STREET ADDRESS 1501 SHEPHERD RD, STE 5
CITY-ST-ZIP LAKELAND FL

TITLE ☐ Change ☐ Add on
NAME ☐ Change ☐ Add on
STREET ADDRESS ☐ Change ☐ Add on
CITY-ST-ZIP ☐ Change ☐ Add on

TITLE D ☐ Delete
NAME BLAKE, WENDELL O.
STREET ADDRESS 1420 MARTIN LUTHER KING
CITY-ST-ZIP LAKELAND FL

TITLE ☐ Change ☐ Add on
NAME ☐ Change ☐ Add on
STREET ADDRESS ☐ Change ☐ Add on
CITY-ST-ZIP ☐ Change ☐ Add on

TITLE D ☐ Delete
NAME OWENS, THOMAS A.
STREET ADDRESS 3000 ROYAL MARCO WAY 615
CITY-ST-ZIP MARCO ISLAND FL

TITLE ☐ Change ☐ Add on
NAME ☐ Change ☐ Add on
STREET ADDRESS ☐ Change ☐ Add on
CITY-ST-ZIP ☐ Change ☐ Add on

TITLE ☐ Delete
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CITY-ST-ZIP ☐ Delete

TITLE ☐ Change ☐ Add on
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CITY-ST-ZIP ☐ Delete

TITLE ☐ Change ☐ Add on
NAME ☐ Change ☐ Add on
STREET ADDRESS ☐ Change ☐ Add on
CITY-ST-ZIP ☐ Change ☐ Add on

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Carlton D. Hodges

4/20/01

Date

Daytime Phone #

CR2E034 (10/00)