## 2002 UNIFORM BUSINESS REPORT (UBR) **FILED** May 08, 2002 8:00 am Secretary of State DOCUMENT # N00000002393 LAKEFOREST AT ST. LUCIE WEST HOMEOWNERS ASSOCIAT 05-08-2002 90037 039 \*\*\*\*70.00 ION, INC. Principal Place of Business Mailing Address 600 W. HILLSBORO BLVD., STE, #101 600 W. HILLSBORO BLVD., STE. #101 80091261 DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441 2. Principal Place of Business 3. Mailing Address c/o Bayshore Association Mgt. c/o Bayshore Association Mgt Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 606 SW Bayshore Blvd. <u>606 SW Bayshore Blvd</u> City & State City & State 4. FEI Number Applied For Port St. Lucie, 65-1005844 Port St.Lucie, Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 34983 34983 Fee Required -6.- Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Scott F. Smith Street Address (P.O. Box Number is Not Acceptable) TRAUTMAN, ROBERT J 600 W. HILLSBORO BLVD., STE. #101 600 West Hillsboro Blvd. DEERFIELD BEACH FL 33441 Ste. #101 Zip Code Deerfield Beach 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 inted name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE □ Delete TITLE ☐ Change ☐ Addition 9/01 NAME trautman, Robert J NAME STREET ADDRESS 600 W. HILLSBORO BLVD., STE. #101 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BEACH FL 33441 VTD ☐ Delete TITLE Change ☐ Addition NAME KAPUSTEIN, WALTER P NAME STREET ADDRESS 600 W. HILLSBORO BLVD., STE. #101 STREET ADDRESS CITY-ST-ZIP. CITY-ST-ZIP. DEERFIELD: BEACH FL: 33441 TITLE SD Delete TITLE Change ☐ Addition NAME SMITH, SCOTT F NAME STREET ADDRESS 600 W. HILLSBORO BLVD., STE. #101 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP <u>DEERFIELD BEACH FL 33441</u> TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

2000 UNE BOUNE DO CON F. SMITH 4/12/02 914426 999