

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 03, 2003 8:00 am
Secretary of State

03-03-2003 90491 029 ****61.25

DOCUMENT # N00000006529

1. Entity Name

LAKE MORLEY TERRACE HOME OWNERS ASSOCIATION, INC



Principal Place of Business

**14903 LEJUENE LANE
TAMPA FL 33613**

Mailing Address

**14903 LEJUENE LANE
TAMPA FL 33613**

2. Principal Place of Business

14903 LEJUENE LANE

3. Mailing Address

14903 LEJUENE LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAMPA FL

City & State

TAMPA FL

Zip

33613

Country

Hillsborough

Zip

33613

Country

Hillsborough

6. Name and Address of Current Registered Agent

**KINGSLEY, KENNETH
14927 PHILMORE RD.
TAMPA FL 33613**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME	PD ROBINSON, RUTH	☐ Delete
STREET ADDRESS	14903 LEJUENE LANE	
CITY-ST-ZIP	TAMPA FL 33613	
TITLE NAME	SD JERNIGAN, JOHN	☐ Delete
STREET ADDRESS	14927 HARDY DR W	
CITY-ST-ZIP	TAMPA FL 33613	
TITLE NAME	TD JAHN, LYNN	☐ Delete
STREET ADDRESS	14924 PHILMORE ROAD	
CITY-ST-ZIP	TAMPA FL 33613	
TITLE NAME		☐ Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Delete
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	PD Robinson, Ruth	☐ Change ☐ Addition
STREET ADDRESS	14903 LEJUENE LANE	
CITY-ST-ZIP	TAMPA FL 33613	
TITLE NAME	SD RINQUIST, PAMELA	☒ Change ☐ Addition
STREET ADDRESS	14914 Philmore Rd	
CITY-ST-ZIP	TAMPA FL 33613	
TITLE NAME	TD COULAM, John	☒ Change ☐ Addition
STREET ADDRESS	14907 LEJUENE LANE	
CITY-ST-ZIP	TAMPA FL 33613-1519	
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		

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.

SIGNATURE:

SIGNATURE: [Signature] Pres.

Feb. 22, 2003 813-962-3717

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)