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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # N00000007790

1. Entity Name

LAKEWOOD RANCH COMMUNITY ACTIVITIES, INC.

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2. Principal Place of Business	3. Mailing Address
6310 Lakewood Ranch Blvd.	6310 Lakewood Ranch Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Bradenton, FL	City & State: Bradenton, FL
Zip: 34202 Country: USA	Zip: 34202 Country: USA

4. FEI Number 65-1060278 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

7. Name and Address of Current Registered Agent

Name: Weaver, Judy

Street Address (P.O. Box Number is Not Acceptable): 6310 Lakewood Ranch Blvd.

City: Bradenton, FL **FL** Zip Code: 34202

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: Judy Weaver Registered Agent — Judy Weaver, (Programs Manager) — 9-26-02

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) — DATE

FEE IS $61.25
Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE DP NAME O'Leary, Donald STREET ADDRESS 6310 Lakewood Ranch Blvd. CITY-ST-ZIP Bradenton, FL 34202	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE DV NAME Griffiths, Lyn STREET ADDRESS 6310 Lakewood Ranch Blvd. CITY-ST-ZIP Bradenton, FL 34202	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE DV NAME Fanara, Jackie STREET ADDRESS 6310 Lakewood Ranch Blvd. CITY-ST-ZIP Bradenton, FL 34202	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE DS NAME Amodio, Jerree STREET ADDRESS 6310 Lakewood Ranch Blvd. CITY-ST-ZIP Bradenton, FL 34202	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE DT NAME Price, Steve STREET ADDRESS 6310 Lakewood Ranch Blvd. CITY-ST-ZIP Bradenton, FL 34202	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP

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CR2E037B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Donald O'Leary, Dir/Pres — 9-26-02 — (941) 907-1227

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

gs 9/30/02