

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

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

03-03-2003 90907 005 ****61.25

DOCUMENT # NO1000002776

1. Entity Name

NORTH SHORE AT LAKE HART HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

**5511 HANSEL AVENUE
ORLANDO FL 32809**

Mailing Address

**5511 HANSEL AVENUE
ORLANDO FL 32809**

2. Principal Place of Business

3401 S. Kirkman Rd

3. Mailing Address

3401 S. Kirkman Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

475

475

City & State

Orlando FL

City & State

Orlando FL

32819

Country

32819

Country

4. FEI Number **59-3735721**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**SECRETIST, ROBERT L III
5511 HANSEL AVENUE
ORLANDO FL 32809**

7. Name and Address of New Registered Agent

**Community Mgmt Prof Inc
5401 S Kirkman Rd
SUITE 475**

City **Orlando**

FL

Zip Code **32819**

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

Robert L. III, Pres.

(NOTE: Registered Agent signature required when reinstating)

2/28/03

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 **PD** ☐ Delete
NAME **RUSSELL, DOUGLAS R**
STREET ADDRESS **5511 HANSEL AVENUE**
CITY-ST-ZIP **ORLANDO FL 32809**

TITLE **VSTD** ☐ Delete
NAME **SECRETIST, ROBERT L III**
STREET ADDRESS **5511 HANSEL AVENUE**
CITY-ST-ZIP **ORLANDO FL 32809**

TITLE **D** ☐ Delete
NAME **HOOVER, DOUGLAS P**
STREET ADDRESS **5511 HANSEL AVENUE**
CITY-ST-ZIP **ORLANDO FL 32809**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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:

Robert L. III, Pres.

PRE.S.

2/6/03

401-277-9277

CR2E037 (10/02)