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

FILED
May 01, 2003 8:00 am
Secretary of State
04-16-2003 90180 037 ****61.25

DOCUMENT # N02000007657

1. Entity Name
LLOYD ACRES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
P. O. BOX 194 LLOYD FL 32337	P. O. BOX 194 LLOYD FL 32337

☐ CHECK HERE IF MAKING CHANGES

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: Not Applicable ☐ 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
CARROLL, BARBARA J 1410 WILD TURKEY MONTICELLO FL 32344	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: Barbara J. Carroll 4-14-03
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WILLIAMS, ROBERT 899 QUAIL LANE MONTICELLO FL 32344	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Shiver, Larry 25 Blue Jay ~~Monticello FL 32344~~	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD GUBALA, DAVID 62 CARDINAL LANE MONTICELLO FL 32344	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice Pres. Williams, John 100 Quail Lane Monticello FL 32344	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CARROLL, BARBARA J 1410 WILD TURKEY MONTICELLO FL 32344	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Carroll, Barbara 1410 Wild Turkey Monticello FL 32344	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BARNES, BABETTE 1030 QUAIL LANE MONTICELLO FL 32344	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Barnes, Babette 1030 Quail Lane Monticello FL 32344	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KING, RANDY 95 QUAIL LANE MONTICELLO FL 32344	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Dawler, Donna 509 Quail Lane Monticello FL 32344	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CORNISH, PAUL R 104 ROBIN RD. MONTICELLO FL 32344	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Gordon, Bruce 201 Robin Road Monticello FL 32344	☒ Change ☐ Addition

CR2E037 (10/02)

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: Barbara J. Carroll SIGNATURE REQUIRED 4-14-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #