

FILED
May 22, 2000 8:00 am
Secretary of State

01-20-2000 90211 048 ****61.25

DOCUMENT # N03459
1. Entity Name
THE LAKES AT THE BLUFFS HOMEOWNERS ASSOCIATION.

Principal Place of Business Mailing Address
1165 11TH COURT. 1165 11TH COURT.
JUPITER FL 33477 JUPITER FL 33477-9002

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State
Zip Country Zip Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-2430779** Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**EDWARD DICKER, ESQ.
ST JOHN KING & DICKES
500 AUSTRALIAN AVE, S.
WEST PALM BEACH FL 33401**

7. Name and Address of New Registered Agent
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.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) 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 Department of State

| 10. OFFICERS AND DIRECTORS | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 |
|--|--|
| <p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p> <p>VPD LONGO, SAM 1002 10TH COURT JUPITER FL 33477</p> <p>Vice President <input checked="" type="checkbox"/> Delete</p> | <p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p> <p>THERESA HEATH 1946 19TH CT. JUPITER, FL 33477</p> <p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p> |
| <p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p> <p>T ROMANO, JOE 1310 13TH COURT JUPITER FL 33477</p> <p>Treasurer <input type="checkbox"/> Delete</p> | <p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p> <p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p> |
| <p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p> <p>PD SEGRETO, JACK 1305 13TH CT JUPITER FL 33477</p> <p>President <input type="checkbox"/> Delete</p> | <p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p> <p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p> |
| <p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p> <p>SK Barbara Wetzstein 1152 11TH CT JUPITER FL 33477</p> <p>Secretary <input type="checkbox"/> Delete</p> | <p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p> <p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p> |
| <p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p> <p>Robert Lopez 1234-12th St Jupiter FL 33477</p> <p>Director <input type="checkbox"/> Delete</p> | <p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p> <p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p> |
| <p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p> <p><input type="checkbox"/> Delete</p> | <p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p> <p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p> |

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]* Date: **1/14/00** Daytime Phone #