

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 19, 2000 8:00 am  
Secretary of State

04-19-2000 90030 025 \*\*\*\*70.00

DOCUMENT # N04993

1. Entity Name

LAKE SHORE MOBILE HOME OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

31 ARLENE AVE  
HALLANDALE FL 33009

31 ARLENE AVE  
HALLANDALE FL 33009-3803

00041000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

31 Arlene Ave

31 Arlene Ave

City & State  
Hallandale, FL

City & State  
Hallandale, FL

Zip  
33009

Country  
Broward

Zip  
33009-3803

Country  
Broward

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

Name

Lucy Ludlow

Street Address (P.O. Box Number is Not Acceptable)

143 Lori Lane

City

Hallandale, FL FL 33009

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 *Lucy Ludlow*

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

(NOTE: Registered Agent signature required when reinstating)

3/3/00

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROY, MADELEINE 137 STEVEN ST HALLANDALE FL 33009	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BELAIR, LORRAINE 102 LORI LANE HALLANDALE FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD COTE, GERARD 136 STEVEN ST HALLANDALE FL 33009	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MICHAUD, NICOLE 111 LORI LANE HALLANDALE FL 33009	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOUDREAU, LOUIS 111 LORI LANE HALLANDALE FL 33009	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUISSON, J P 129 STEVEN ST HALLANDALE FL 33009	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Lucy Ludlow 143 Lori Lane Hallandale, FL 33009	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Diane Fox 135 Steven St. Hallandale, FL 33009	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Colette Leroux 43 7 latbush ave Hallandale, FL 33009	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Pierie Blanchette 106 Lori Lane Hallandale, FL 33009	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ruth Dean 31 Arlene Ave Hallandale, FL 33009	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sandy Cardinas 135 Steven St. Hallandale, FL 33009	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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:

*Lucy Ludlow*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Lucy Ludlow* 3/3/00 24 960 76476  
Date Daytime Phone

CR2E037 (9/99)