

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N04993**

1. Entity Name

LAKESHORE MOBILE HOME OWNERS ASSOCIATION, INC.FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 OCT 18 PM 4:26

Principal Place of Business

Mailing Address

31 ARLENE AVE
HALLANDALE FL 3300931 ARLENE AVE
HALLANDALE FL 33009

2. Principal Place of Business

31 ARLENE AVE

3. Mailing Address

31 ARLENE AVE

Suite, Apt., #, etc.

Suite, Apt., #, etc.



DO NOT WRITE IN THIS SPACE

City & State

HALLANDALE, FL

City & State

HALLANDALE, FL

4. FEI Number

NOT APPLICABLE

Applied For

☒ Not Applicable

Zip

33009

Country

BROWARD

Zip

33009-3803

Country

BROWARD

5. Certificate of Status Desired

☒**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**LUDLOW, LUCY
123 LORI LANE
HALLANDALE FL 33009**

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 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
Department of State**

10. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

P**LUDLOW, LUCY
123 LORI LANE
HALLANDALE FL 33009**☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TD**FOX, DIANE
135 STEVEN STREET
HALLANDALE FL 33009**☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

S**LEROUX, COLETTE
43 FLATBUSH AVENUE
HALLANDALE FL 33009**☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D**BLANCHETTE, PIERIE
106 LORI LANE
HALLANDALE FL 33009**☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D**DEAN, RUTH
31 ARLENE AVENUE
HALLANDALE FL 33009**☒ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D**CARDINAS, SANDY
135 STEVENS STREET
HALLANDALE FL 33009**☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change☐ Addition

TITLE

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CITY-ST-ZIP

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☒ Change☐ Addition

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NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change☐ 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 empowerments.

SIGNATURE

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Lucy Ludlow 10/01-954-962-849

CR2007 (10/00)

Sir:

10/15/01

Sorry about the signatures I
may have overlooked, but we
did send the money & names.

I just received this in the mail
about the error I am sending
it to be corrected.

Thank you

Deane Fox-Tres

Enclosed, the envelope in which
the letter was mailed.