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

FILED
Feb 20, 2003 8:00 am
Secretary of State
02-20-2003 90138 044 ****70.00

DOCUMENT # N06776

1. Entity Name

COUNTRY LAKE CONDOMINIUM OWNER'S ASSOCIATION, INC.

Principal Place of Business	Mailing Address
100 COUNTRY LANE NE WINTER HAVEN FL 33881-2647	100 COUNTRY LANE NE WINTER HAVEN FL 33881-2647

☒ 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 59-2491259 ☐ 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
ATKINSON, FRED S 608 COUNTRY LANE NE WINTER HAVEN FL 33881	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 Fred S Atkinson 2-18-03
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	D FEIT, BERNADETTE 205 COUNTRY LN NE WINTER HAVEN FL 33881	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Greg Kent D 206 Country Lane NE Winter Haven, Fl. 33881 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PARKER, JOANN 601 COUNTRY LANE NE WINTER HAVEN FL 33881	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Sec. Ann Owens 701 Country Lane NE Winter Haven, Fl. 33881 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NORMAN, MARY 604 COUNTRY LANE NE WINTER HAVEN FL 33881	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP FEIT, LARRY 205 COUNTRY LN NE WINTER HAVEN FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ATKINSON, FRED 608 COUNTRY LN NE WINTER HAVEN FL 33881	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D OWENS, DON 701 COUNTRY LN NE WINTER HAVEN FL 33881	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ 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: SIGNATURE REQUIRED Fred S Atkinson 2-18-03 863 295-9338
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR