2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 19, 2002 8:00 am Secretary of State **DOCUMENT # N07068** 1. Entity Name 05-19-2002 90217 041 ****61 25 MIAMI LAKES LAKE CYNTHIA HOMEOWNERS' ASSOCIATION , INC. Principal Place of Business Mailing Address 15476 N.W. 77TH CT. 15476 N.W. 77TH CT. PMR 116 PMR 116 MIAMI LAKES FL 33016-5823 MIAMI LAKES FL 33016-5823 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0022564 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CHERIE LDENBURG Street Address (P.O. Box Number is Not Acceptable) LUNG, H. DOUGLAS 14830 BRECKNESS PLACE MIAMI LAKES FL 33016 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. 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. (9/04) TITLE ☐ Delete TITLE ☐ Change ☐ Addition WELLS, JACK NAME NAME STREET ADDRESS STREET ADDRESS 14826 BRECKNESS PLACE CITY-ST-7IP CITY-ST-ZIP MIAMI LAKES FL TITLE SD □ Delete TITLE Change ☐ Addition SORIANO, SUZANNE NAME NAME STREET ADDRESS STREET ADDRESS 14744 BRECKNESS PLACE CITY-ST-7IP CITY-ST-7IP MIAMI LAKES FL 33016 Delete ☐ Change ☐ Addition TITLE TITLE NAME Masters, Donna NAME STREET ADORESS 14719 GLEN CARIN ROAD STREET ADDRESS CITY-ST-7IP CITY-ST-7IP MIAMI LAKES FL 33016 TITLE 🔀 Delete TITI F Change Addition CHERIE ULDENBURG NAME LUNG, H. DOUGLAS NAME 14738 BRECKNESS STREET ADDRESS 14830 BRECKNESS PLACE STREET ADDRESS CITY-ST-ZIP MIAMI LAKES FL CITY-ST-ZIP MIAMILAKES ろろつしん Delete TITLE Change MEADOR, BETTY NAME NAME STREET ADDRESS 14818 BRECKNESS PLACE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI LAKES FL 33016 PD **Delete** ☐ Change **Addition** MURRAY, DONALD BAYREIS NAME CHRISTEL

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 of 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 Jike emboowered. 🧸

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

14739 GLENCAIRN ROAD

MIAMI LAKES FL 33016

STREET ADDRESS

14730 BRECK NESS

Mirami LAKES

AHaChMeN/

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BOX 11 ADDITIONS TO OFFICERS AND DIRECTORS

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