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2001 UNIFORM BUSINESS REPORT (UBR)

FILED Sep 21, 2001 8:00 am

DOCUMENT # N13408 1. Entity Name				Secretary of State 08-16-2001 90005 005 ****61.25						
LAKES	DE CIVIC ASSOCIATION	, INC.	/			- -	911 2 0			
Principal Pla	ce of Business	Mailing Address	- +	W						
P.O. BOX 10271 LARGO FL 33773		P.O. BOX 10271 LARGO FL 33773 US	LARGO FL 33773			. • • • • •				
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE .				
City & State		City & State	City & State			4. FEI Number 59-2035012 Applied For Not Applicable				
Zip Country		Zip	Country		5. Certificate of Status Desired See Required \$8.75 Additional Fee Required			iltional		
	6. Name and Address of Cu	rrent Registered Agent	Name		-7. Name and Add	reas of New Register	ed Agent			
COBB, DEBBIE			Address (F	(P.O. Box Number is Not Acceptable)						
11556 Tradewinds BLVD Largo FL 33773								<u>-</u>	1	
LANGO	T 33113		City				L Zip Cod	e	1	
¿8. The above	e named entity submits this statem	nent for the purpose of changing its	registered office of	r registere	ed agent, or both, in	the state of Florida.			1	
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SIGNATURE		h I reasoner		كعلا	he Le	elb- "	<u>&-&-</u>	<u> </u>		
	Signature, typed or printed name of registers	d agent and title if applicable. (NOTE:	Registered Agent signa	ture required	when reinstating)	DA*	E			
FILE NOW: FEE IS \$61.25 After September 12, 2001, min. will be \$236.25 9. Election Campai Trust Fund Conte				\$5.00 May Be Added to Fees Make Check Payable to Department of State						
10.		ID DIRECTORS	11,	A	DDITIONS/CHANG	ES TO OFFICERS AND	DIRECTORS IN	10		
TITLE	PD LEE, JAMES	Dalete	TITLE	_	roident	\overline{D}	Change	Addition .	(5/01	
NAME STREET ADDRESS	11578 TRADEWINDS BLVD		NAME Street adoress		m Kel	Borside	0		37.6	
CITY-ST-ZIP	LARGO FL 33773		CITY-ST-ZIP	بما	200		<u> </u>		CR9FM17	
TITLE	OCI MONTE DODOTIN	☐ Delete	TITLE	1131	Vice P	resident	Change	Addition	٤	
NAME STREET ADDRESS	BELMONTE, DOROTHY 11622 TRADEWINDS BLVD		NAME Street Address	ar		Milnitha	pe ?	${\mathfrak D}$	l	
CITY-ST-ZIF.	-LARGO FL-33773	بمنش مستحدث	= City-ST-ZIP	 	18. Har	Doctoride	Cir.		<u>-</u>	
_TME	TO	Delete	1mle				Change	Addition	نديدية أ	
NAME	COBB, DEBBIE) ·	NAME							
STREET ADDRESS CITY-ST-ZIP	11556 TRADEWINDS BLVD LARGO FL 33773		STREET ADDRESS CITY-ST-ZIP						ĺ	
TITLE	V	☐ Delete	TITLE	<u>>56</u>	VILC. P	esident	Change	☐ Addition	ĺ	
NAME	LEE, TERRI		NAME	3	ema					
STREET ADDRESS	11578 TRADEWINDS BLVD		STREET ADDRESS	1116	x5.Har	borside	. D		1	
CITY-ST-ZIP	LARGO FL 33773	Not not	CITY-ST-ZIP	مح	rgo, TL	<u> </u>	NA Chones	☐ Addition	ı	
TITLE NAME	BEST, JOHN M	X Delete	TITLE NAME	ヱ゚	cretar	. 7	Change	L Abeltion	ı	
STREET ADDRESS	9690 LEEWARD AVE		STREET ADDRESS		zri Lee	د اد اماد آ	, 21.	, [
CITY-ST-ZIP	LARGO FL 33773		CITY-ST-ZIP	مُن	218 F	ورم يحربي 64	>10100	1.		
TITLE		. Delete	TITLE		- 1 - 1 ,		Change	☐ Addition	i	
NAME STREET ADDRESS	}		NAME STREET ADDRESS							
CITY-ST-ZIP			CITY-ST-ZIP					1		

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.