

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

FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90329 023 ****61.25

DOCUMENT # N13967

1. Entity Name

LAKE-IN-THE-WOODS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**4720 BECK LAKE TRAIL
MELBOURNE FL 32901-8557**

Mailing Address

**4720 BECK LAKE TRAIL
MELBOURNE FL 32901-8557**

10023478



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2654914**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**KNOEBEL, PAUL R
4720 -4 LAKE WATERFORD WAY
MELBOURNE FL 32901**

Name

DORIS TYNER

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

4561-1 BECK LAKE TRAIL

City

MELBOURNE

FL

Zip Code

32901

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 **Doris Tyner**

DORIS TYNER TREASURER

2-15-03

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 **S** ☒ Delete
NAME **MCKEONE, PAULINE**
STREET ADDRESS **4640 BECK LAKE TRAIL**
CITY-ST-ZIP **MELBOURNE FL 32901**

TITLE **Y** ☐ Change ☒ Addition
NAME **DAVID PENDERCAST**
STREET ADDRESS **4640-3 LAKE WATERFORD WAY**
CITY-ST-ZIP **MELBOURNE FL 32901**

TITLE **SD** ☐ Delete
NAME **THOM BAILEY**
STREET ADDRESS **4540-4 BECK LAKE TRAIL**
CITY-ST-ZIP **MELBOURNE FL**

TITLE **PD** ☒ Change ☐ Addition
NAME **THOMAS BAILEY**
STREET ADDRESS **4540-4 BECK LAKE TRAIL**
CITY-ST-ZIP **MELBOURNE, FL 32901**

TITLE **D** ☐ Delete
NAME **DOROTHY GOETZ**
STREET ADDRESS **4720-3 LAKE WATERFORD WAY**
CITY-ST-ZIP **MELBOURNE FL**

TITLE **S** ☐ Change ☒ Addition
NAME **KATHRYN LARSON**
STREET ADDRESS **4630 BECK LAKE TRAIL**
CITY-ST-ZIP **MELBOURNE, FL 32901**

TITLE **T** ☐ Delete
NAME **TYNER, DORIS**
STREET ADDRESS **4561-1 BECK LAKE TRAIL**
CITY-ST-ZIP **MELBOURNE FL 32901**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **RADER, DONALD**
STREET ADDRESS **4610-7 LAKE WATERFORD WAY**
CITY-ST-ZIP **MELBOURNE FL 32901**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PD** ☒ Delete
NAME **KNOEBEL, PAUL R**
STREET ADDRESS **4720-4 LAKE WATERFORD WAY**
CITY-ST-ZIP **MELBOURNE FL 32901**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: **DORIS TYNER** **REQUIRE** **Doris Tyner** **2-15-03** **321-953-3664**

CR2E037 (10/02)