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

FILED
Mar 03, 2003 8:00 am
Secretary of State
02-04-2003 90129 035 ****61.25

DOCUMENT # N16414

1. Entity Name
LOVELL TERRACE PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1155 HIGHLAND ACRES DR. APOPKA FL 32703 US	1155 HIGHLAND ACRES DR. APOPKA FL 32703 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
2450 COUNTY Rd 44 W.	P.O Box 578
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: EUSTIS, FL	City & State: APOPKA
Zip: 32726 Country: USA	Zip: 32704-578 Country: USA

4. FEI Number 59-2882261 ☐ 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
RHYNE, HERMAN JOSEPH 1155 HIGHLAND ACRES DR. APOPKA FL 32703	Name: SANDRA LEWIS Street Address (P.O. Box Number is Not Acceptable): 2450 COUNTY ROAD 44 WEST City: EUSTIS FL Zip Code: 32726

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: Sandra L Lewis SANDRA L LEWIS 1/31/2003
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	PD THOMBLESON, RICK 253 LOVELL LN APOPKA FL 32703	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRES JEFF ADAMS 230 LOVELL LN APOPKA FL 32703	☐ Change ☒ Addition T
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SCHMIDT, BONNIE 265 LOVELL LN APOPKA FL 32703	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP PATTY DAVIS 258 LOVELL LN APOPKA FL 32703	☐ Change ☒ Addition T
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T RHYNE, HERMAN JOSEPH 1155 HIGHLAND ACRES DR. APOPKA FL 32703	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECT. DAMARIS LIBOY 245 LOVELL LN. APOPKA FL 32703	☐ Change ☒ Addition T
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RENO, GINGER 262 LOVELL LN APOPKA FL 32703	☐ Delete D	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CALLAHAN, TAMARA 213 LOVELL LN APOPKA FL 32703	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LEWIS, SANDRA 2708 GLENN EDWIN CRT APOPKA FL 32712	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER LEWIS, SANDRA 2450 COUNTY ROAD 44 WEST EUSTIS FL 32726	☒ Change ☐ Addition T

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: Sandra L Lewis SIGNATURE REQUIRED SANDRA L LEWIS 1/31/2003 (352) 357-3555
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #