

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

**FILED**  
**Feb 10, 2003 8:00 am**  
**Secretary of State**

02-10-2003 90234 018 \*\*\*\*61.25

**DOCUMENT # N22446**

1. Entity Name

**LAKE IN THE WOODS AT VERO BEACH CONDOMINIUM ASSO  
CIATION, INC.**



Principal Place of Business

**1900 WATERFORD DR  
VERO BEACH FL 32966  
US**

Mailing Address

**1900 WATERFORD DR  
VERO BEACH FL 32966  
US**

2. Principal Place of Business

3. Mailing Address

**3240 Cardinal Drive**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**Suite 200**

City & State

City & State

**Vero Beach FL**

Zip

Country

Zip

Country

**32963**

**USA**



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2793180**

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

**SCHLITZ PROP MGMT  
2027 INDIAN RIVER BLVD, 2ND FLOOR  
VERO BEACH FL 32966**

Name

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

**3240 Cardinal Drive**

**Suite 200**

City

**Vero Beach**

FL

Zip Code

**32963**

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

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	SD BECK, VANN 1940-8 WESTMINSTER CIR VERO BEACH FL 32966	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COLLETTE, RICHARD 1610-1 WATERFORD DR VERO BEACH FL 32966	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP CARTER, VIRGINIA 1920-1 WESTMINSTER CR VERO BEACH FL 32966	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RILEY, JAMES 1910-2 WESTMINSTER CIR VERO BEACH FL 32966	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MAJEWSKI, JOHN 1930-1 WESTMINSTER CIR VERO BEACH FL 32966	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Beck, Vann 1940-8 Westminster Cir Vero Beach FL 32966	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Collette, Richard 1810-1 Waterford Dr Vero Beach FL 32966	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 John Majewski** 1/17/03 772 567-1181