

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N24065

1. Entity Name

LAFAYETTE ESTATES HOMEOWNERS' ASSOCIATION, INC.

FILED
Feb 13, 2002 8:00 am
Secretary of State

02-13-2002 90003 006 ****61.25

Principal Place of Business

Mailing Address

P.O. BOX 11005
TALLAHASSEE FL 32302

P.O. BOX 11005
TALLAHASSEE FL 32302

00000000

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2907788

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

SON, DONNA
1986 VINELAND DR.
TALLAHASSEE FL 32311

Name

Pfeifer, Brian

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

1831 Vineland Lane

City

Tallahassee

FL

Zip Code

32317

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.

SIGNATURE

[Signature]

Treasurer

1-25-02

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DP
NAME MOREAU, RAY
STREET ADDRESS 1895 VINELAND LANE
CITY-ST-ZIP TALLAHASSEE FL 32311 ☐ Delete

TITLE DP
NAME Moreau, Ray
STREET ADDRESS 1895 Vineland Lane
CITY-ST-ZIP Tallahassee, FL 32317 ☒ Change ☐ Addition

TITLE DVP
NAME CAIN, EDDIE
STREET ADDRESS 1883 VINELAND LANE
CITY-ST-ZIP TALLAHASSEE FL 32311 ☐ Delete

TITLE DVP
NAME Bogan, Linzie
STREET ADDRESS 1807 Vineland Lane
CITY-ST-ZIP Tallahassee, FL 32317 ☒ Change ☐ Addition

TITLE T
NAME SON, DONNA
STREET ADDRESS 1986 VINELAND LANE
CITY-ST-ZIP TALLAHASSEE FL 32311 ☐ Delete

TITLE T
NAME Pfeifer, Brian
STREET ADDRESS 1831 Vineland Lane
CITY-ST-ZIP Tallahassee, FL 32317 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE S
NAME Liles, Jay
STREET ADDRESS 1962 Vineland Drive
CITY-ST-ZIP Tallahassee, FL 32317 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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 another like empowered.

SIGNATURE:

SIGNATURE REQUIRED

1-25-02

(850)894-4558

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)