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

DOCUMENT # N24065

1. Entity Name

LAFAYETTE ESTATES HOMEOWNERS' ASSOCIATION, INC.



FILED
Jan 07, 2003 8:00 am
Secretary of State

01-07-2003 90018 004 ****61.25

					1	S. 1.						
Principal Place of Business Mail			Mailing Address			1						
P.O. BOX 11005 P.O.			O. BOX 11005 ALLAHASSEE FL 32302									
							1 (2014) 210 (1014)	Bibli buita bilat bili bia	I ala n ara n a ran an	BIT 21211 1221		
2. Principal Place of Business 3. I			3. Ma	3. Mailing Address								
Suite, Apt. #, etc			S	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES					
City & State			C	City & State			4. FEI Number 59-2907788 Applied For Not Applicable]	
Zip	en se ^l Tomper	Country	Zip Co		* Country *	· The state of the	5. Certificate of Status Desired S8.75 Addition Fee Required			ditional		
	6. Name	and Address of Curre	nt Register	ed Agent		7. Name and Addres			ess of New Registered Agent			
		00.0			Nan	ne		<u>.</u>			7	
BRIAN, PFIFER Pfeifer					Stre	et Address (4			
1931 VINELAND DR.				Officer Address			(P.O. Box Number is Not Acceptable)					
TALLAHA	ASSEE FL 32	311								·		
					City				Zip Cod		4	
•									▔▙▁▕▁▕			
8. The above	e named entity itions of registe	submits this statement	for the purp	oose of changing its r	egistered offic	e or register	ed agent, or both, in th	e State of Florida.	am familiar with,	and accept		
	acono or rogiste	sred agent.									1	
V SIGNATURE												
Signature, typed or printed name of registered agent and title if ap				oplicable. (NOTE: Registered Agent signature required			when reinstating)	DA				
				· · · · · · · · · · · · · · · · · · ·							1	
FILE NOW: FEE IS \$61.25				9. Election Campaign Financing			\$5.00 May Be	Make Ch	eck Payable	to		
			Trust Fund Contribution.			Added to Fees	Florida Dej	partment of S	State			
									_		-	
10.	DP	OFFICERS AND DIRECTORS		-			ADDITIONS/CHANGES TO OFFICER		S AND DIRECTORS IN 10]_	
TITLE NAME	MOREAU, F	DAV		Delete	TITLE	DΡ	Λ		Change	Addition	(10/02)	
STREET ADDRESS					NAME CIRCET ADDRES	More	an Ray Vineland Lane				15	
STREET ADDRESS 1895 VINELAND LANE CITY-ST-ZIP TALLAHASSEE FL 32311					STREET ADDRE			2717				
TITLE	DVP	ALL I L DEUII			ł	PVP	whosser, FLC	52311			R2E037	
NAME	CAIN, EDDI	E		☐ Delete	TITLE NAME				Change	Addition	18	
STREET ADDRESS.		AND LANE		_	STREET ADDRES	్డ్ క్రాంస్త	an, Linzie Vineland Lane					
0.774 07 710	7411 41400			_	3	~. /80/	Alkeinter mouse	-	· · · · · ·		1	

CITY-ST-ZIP TALLAHSSEEE FL 32311 CITY-ST-ZIP Tallahassee, FL 32317 TITLE ☐ Delete TITLE Change Addition SON, DONNA Heifer, Brian NAME 1986 VINELAND LANE STREET ADDRESS STREET ADDRESS 1831 Vikeland Lane CITY-ST-ZIP TALLAHASSEE FL 32311 CITY-ST-ZIP Tallahassee, FL 32317 TITLE ☐ Delete ☐ Change **Addition** NAME NAME Liles, Jay 1962 Vineland Dr. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Tallahassee, FL 32317 TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME

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.

STREET ADDRESS

CiTY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINCED NAME OF SIGNING OFFICER OR DIRECTOR

1-4-03

1850)894-4558