

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N33166

1. Entity Name

ORANGE BLOSSOM-LADY LAKE CHAPTER #4432 OF AMERIC

**FILED**  
**May 01, 2000 8:00 am**  
**Secretary of State**

05-01-2000 90392 026 \*\*\*\*61.25

Principal Place of Business

Mailing Address

LA HACIENDA CENTER  
 1100 MAIN STREET  
 LADY LAKE FL 32159  
 US

BOX 1015  
 LADY LAKE FL 32158-1015



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

94-3085220

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

DAVIS, SHIRLEY L  
 1109 W. BOONE CT.  
 LADY LAKE FL 32159

Name

LICHTENBERGER, RICHARD C.

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

1011 SAN REMO LANE

City

LADY LAKE

FL

Zip Code

32159

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

*Richard C. Lichtenberger*

4/21/00

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 PD ☒ Delete  
 NAME DAVIS, SHIRLEY L  
 STREET ADDRESS 1109 W. BOONE COURT  
 CITY-ST-ZIP LADY LAKE FL 32159

TITLE PD ☒ Change ☐ Addition  
 NAME LICHTENBERGER, RICHARD C.  
 STREET ADDRESS 1011 SAN REMO LANE  
 CITY-ST-ZIP LADY LAKE, FL 32159

TITLE VD ☒ Delete  
 NAME LICHTENBERGER, RICHARD C  
 STREET ADDRESS 1011 SAN REMO LANE  
 CITY-ST-ZIP LADY LAKE FL 32159

TITLE VD ☒ Change ☐ Addition  
 NAME OWEN, JACQUE M.  
 STREET ADDRESS 2711 PROVIDA  
 CITY-ST-ZIP LADY LAKE, FL 32159

TITLE SD ☒ Delete  
 NAME DOLE, DORIS  
 STREET ADDRESS 810 HIBISCUS DR  
 CITY-ST-ZIP LADY LAKE FL 32159

TITLE SD ☒ Change ☐ Addition  
 NAME DAVIS, SHIRLEY L.  
 STREET ADDRESS 1109 W. BOONE CT.  
 CITY-ST-ZIP LADY LAKE, FL 32159

TITLE TD ☒ Delete  
 NAME BARNES, HAROLD E  
 STREET ADDRESS 1210 E. SCHWARTZ BLVD.  
 CITY-ST-ZIP LADY LAKE FL 32159

TITLE TD ☒ Change ☐ Addition  
 NAME HARDON, VIVIAN V.  
 STREET ADDRESS 1603 E. SCHWARTZ BLVD.  
 CITY-ST-ZIP LADY LAKE, FL 32159

TITLE D ☐ Delete  
 NAME LICHTENBERGER, RUTH N  
 STREET ADDRESS 1011 SAN REMO LANE  
 CITY-ST-ZIP LADY LAKE FL 32159

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

TITLE D ☒ Delete  
 NAME REINEKE, AUDREY  
 STREET ADDRESS 924 ST. ANDREWS BLVD.  
 CITY-ST-ZIP LADY LAKE FL 32159

TITLE D ☒ Change ☐ Addition  
 NAME SAMPLIS, WILMOR  
 STREET ADDRESS 552 RICHARD DR  
 CITY-ST-ZIP LADY LAKE, FL 32159

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:

*Vivian V. Hardon*

HARDON

4/21/00

352-753-0339

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)