2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2003
Secretary of State

DOCUMENT# N37173

Entity Name: GLENLAKES HOMEOWNERS ASSOCIATION - ESTATE SECTION, INC.

Current Principal Place of Business:

9780 SOUTHERN BELLE DR
BROOKSVILLE, FL 34613

New Principal Place of Business:

Current Mailing Address:

9780 SOUTHERN BELLE DR
BROOKSVILLE, FL 34613

New Mailing Address:

FEI Number: 59-3229648 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CONKLIN, FRANKLIN R
9780 SOUTHERN BELLE DR
BROOKSVILLE, FL 34613

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GARDLER, MURRAY PRESIDE
Address: 9780 SOUTHERN BELLE DR
City-St-Zip: BROOKSVILLE, FL 34619

Title: TD ( ) Delete
Name: TANSEY, GENE A
Address: 9780 SOUTHERN BELLE DR
City-St-Zip: BROOKSVILLE, FL 34613

Title: SD ( ) Delete
Name: SPITTLE, DARLENE
Address: 9780 SOUTHERN BELLE DR
City-St-Zip: BROOKSVILLE, FL 34613

Title: VD ( ) Delete
Name: SAWYER, ROBERT VICE PR
Address: 9780 SOUTHERN BELLE DR
City-St-Zip: BROOKSVILLE, FL 34613

Title: D ( ) Delete
Name: HENDRICKS, JOSEPH B
Address: 9780 SOUTHERN BELLE DR
City-St-Zip: BROOKSVILLE, FL 34613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: WILSON, TOM J PRESIDE
Address: 9780 SOUTHERN BELLE DR
City-St-Zip: BROOKSVILLE, FL 34613

Title: TD (X) Change ( ) Addition
Name: TANSEY, GENE A TREASUR
Address: 9780 SOUTHERN BELLE DR
City-St-Zip: BROOKSVILLE, FL 34613

Title: SD (X) Change ( ) Addition
Name: PRISCILLA, LACY R SECRETA
Address: 9780 SOUTHERN BELLE DR
City-St-Zip: BROOKSVILLE, FL 34613

Title: VD (X) Change ( ) Addition
Name: GARDLER, MURRAY VICE PR
Address: 9780 SOUTHERN BELLE DR
City-St-Zip: BROOKSVILLE, FL 34613

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: /S/ TOM J. WILSON, PRESIDENT PD 03/14/2003

Electronic Signature of Signing Officer or Director — Date