

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

FILED
Mar 03, 2003 8:00 am
Secretary of State

03-03-2003 90956 021 ****61.25

DOCUMENT # N47748

1. Entity Name

**LAKE LOUISA & LAKE NELLIE OAKS HOMEOWNERS' ASSN.
, INC.**



Principal Place of Business

P.O. BOX 120561
CLERMONT FL 34712

Mailing Address

P.O. BOX 120561
CLERMONT FL 34712

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3122921**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SHACKELFORD, BARBARA
9036 MOSSY OAK LN
CLERMONT FL 34711**

7. Name and Address of New Registered Agent

Name

Susan Hutcherson

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

9145 Mossy Oak Lane

City

Clermont

FL

Zip Code

34711

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

TITLE	P	☒ Delete
NAME	SAYRE, JEANETTE	
STREET ADDRESS	9116 MOSSY OAK LANE	
CITY-ST-ZIP	CLERMONT FL 34711	
TITLE	V	☐ Delete
NAME	WETTERING, FRED	
STREET ADDRESS	11535 NELLIE OAK BEND	
CITY-ST-ZIP	CLERMONT FL 34711	
TITLE	ST	☒ Delete
NAME	SHACKELFORD, BARBARA	
STREET ADDRESS	9036 MOSSY OAK LANE	
CITY-ST-ZIP	CLERMONT FL 34711	
TITLE	D	☒ Delete
NAME	IZLAR, LONNY	
STREET ADDRESS	9105 MOSSY OAK LN	
CITY-ST-ZIP	CLERMONT FL 34711	
TITLE	D	☐ Delete
NAME	SONNTAG, BOB	
STREET ADDRESS	9029 MOSSY OAK LANE	
CITY-ST-ZIP	CLERMONT FL 34711	
TITLE	D	☐ Delete
NAME	KOTCH, BETTY J	
STREET ADDRESS	11634 NELLIE OAK BEND	
CITY-ST-ZIP	CLERMONT FL 34711	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	☒ Change ☐ Addition
NAME	Lisa Scott	
STREET ADDRESS	9001 Mossy Oak Ln.	
CITY-ST-ZIP	Clermont, FL 34711	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Secretary/Treasurer	☒ Change ☐ Addition
NAME	Susan Hutcherson	
STREET ADDRESS	9145 Mossy Oak Ln	
CITY-ST-ZIP	Clermont, FL 34711	
TITLE	Director	☐ Change ☐ Addition
NAME	Donna Deitrick	
STREET ADDRESS	9042 Mossy Oak Ln.	
CITY-ST-ZIP	Clermont, FL 34711	
TITLE	Director	☐ Change ☐ Addition
NAME	Ann Johnson	
STREET ADDRESS	9045 Mossy Oak Ln	
CITY-ST-ZIP	Clermont, FL 34711	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

1/7/03 352-242-1529