

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90112 043 ****61.25

DOCUMENT # N50054

1. Entity Name

SILENT NEIGHBORS OF LAKE COUNTY, INC.

Principal Place of Business

PO BOX 911
TAVARES FL 32778

Mailing Address

P.O. BOX 911
TAVARES FL 32778-0911

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

59-3121653

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

GOODMAN ZOANN
31849 BLANTON LN
TAVARES FL 32778

Name

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

City

FL

Zip Code

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, 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 ☐ Delete
NAME **T**
STREET ADDRESS **TICE, SANDRA**
CITY-ST-ZIP **321 MARINO DRIVE**
LADY LAKE FL 32159

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

TITLE ☐ Delete
NAME **TRD**
STREET ADDRESS **KEGAN, FAYE**
CITY-ST-ZIP **2405 WINONA AVE**
LEESBURG FL 34748

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

TITLE ☒ Delete
NAME **D**
STREET ADDRESS **DEERY, JASON**
CITY-ST-ZIP **38833 MCKINNEY ROAD**
LADY LAKE FL 32159

TITLE ☒ Change ☐ Addition
NAME **D**
STREET ADDRESS **Beltzer, David**
CITY-ST-ZIP **314 Oak Lane Pass**
Ocala, Fl. 34472

TITLE ☐ Delete
NAME **VP**
STREET ADDRESS **VANLOON, BERT**
CITY-ST-ZIP **2446 ISLAND CLUBWAY**
ORLANDO FL 32822

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

TITLE ☐ Delete
NAME **PD**
STREET ADDRESS **GOODMAN, ZOANN**
CITY-ST-ZIP **31849 BLANTON LANE**
TAVARES FL 32778

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

TITLE ☐ Delete
NAME **DS**
STREET ADDRESS **NELSON, JOHN**
CITY-ST-ZIP **317 SANTA CLARA CIRCLE**
LADY LAKE FL 32159

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

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:

Zoann Goodman
Zoann Goodman
2-23-02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)

ATTACHMENT

Doc#: NS0054

D

344407

Cherwinski, Lois
317 Santa Clara Cir.
Lady Lake, Fl. 32159

JR D

Virginia Lee
3033 Myakka River Rd.
TAVANES, FL. 32778

D

Merlin Tice
321 Marino Dr.
Lady Lake, Fl. 32159

Parliamentian

WARNER St. John
529 Alcazar Ct
LADY LAKE, FL. 32159