

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 25, 2001 8:00 am**  
**Secretary of State**

01-25-2001 90158 038 \*\*\*\*70.00

0053669

**DOCUMENT # N50758**

1. Entity Name

**LIMESTONE CREEK COMMUNITY DEVELOPMENT CORPORATIO**

Principal Place of Business

Mailing Address

6784 CHURCH STREET  
 JUPITER FL 33458-3825

6784 CHURCH STREET  
 JUPITER FL 33458-3825

**703863**



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

**65-0382443**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SCOTT, WILLIE**  
**6784 CHURCH STREET**  
**JUPITER FL 33458**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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 **SD SCOTT, CELESTINE**  
 STREET ADDRESS **6784 CHURCH STREET**  
 CITY-ST-ZIP **JUPITER FL 33458**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **D WISE, KELVIN**  
 STREET ADDRESS **6710 4TH ST**  
 CITY-ST-ZIP **JUPITER FL 33458**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **D HATCHER, DAVID**  
 STREET ADDRESS **6829 4TH ST**  
 CITY-ST-ZIP **JUPITER FL 33458**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **VD CHANEY, NATHANIEL**  
 STREET ADDRESS **17674 CARVER AVE**  
 CITY-ST-ZIP **JUPITER FL 33458**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **PD TISDALE, CHARMAINE**  
 STREET ADDRESS **6699 4TH ST**  
 CITY-ST-ZIP **JUPITER FL 33458**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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:** *[Signature]* **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*1/16/01 (501) 744.9677*

Date Daytime Phone #

CR2E037 (10/00)