

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

001342

DOCUMENT # N50758

1. Entity Name
LIMESTONE CREEK COMMUNITY DEVELOPMENT CORPORATION

Principal Place of Business: **6784 CHURCH STREET JUPITER FL 33458**

Mailing Address: **6784 CHURCH STREET JUPITER FL 33458**

2. Principal Place of Business: Suite, Apt. #, etc.

3. Mailing Address: Suite, Apt. #, etc.

City & State: _____

City & State: _____

Zip: _____ Country: _____

Zip: _____ Country: _____



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 JAN 13 AM 8:00

REINSTATEMENT 03



CHECK HERE IF MAKING CHANGES *MPS*

4. FEI Number **65-0382443** Applied For: Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

SCOTT, WILLIE
6784 CHURCH STREET
JUPITER FL 33458

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Willie Scott* *Willie Scott* DATE *7/24/03*

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
After September 10, 2003, min will be \$236.25

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: SD NAME: SCOTT, CELESTINE STREET ADDRESS: 6784 CHURCH STREET CITY-ST-ZIP: JUPITER FL 33458	<input type="checkbox"/> Delete	TITLE: MARTHA CURTIS - D NAME: MARTHA CURTIS - D STREET ADDRESS: 6811 4TH ST CITY-ST-ZIP: JUPITER, FL 33458	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: PD NAME: WISE, KELVIN STREET ADDRESS: 6710 4TH ST CITY-ST-ZIP: JUPITER FL 33458	<input type="checkbox"/> Delete	TITLE: D MAGGIE WILEY NAME: MAGGIE WILEY STREET ADDRESS: 6742 Church St CITY-ST-ZIP: JUPITER FL 33458	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: VD NAME: TATUM, ROBERT STREET ADDRESS: 6253 N 180 LANE CITY-ST-ZIP: JUPITER FL 33458	<input type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D NAME: BOYD, AUDREY STREET ADDRESS: 6881 CHURCH ST. CITY-ST-ZIP: JUPITER FL 33458	<input checked="" type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: TD NAME: TISDALE, CHARMAINE STREET ADDRESS: 6699 4TH ST CITY-ST-ZIP: JUPITER FL 33458	<input type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VD NAME: TATUM, ROBERT STREET ADDRESS: 6953 N 180 LANE CITY-ST-ZIP: JUPITER FL 33458	<input checked="" type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *John G. Wise, Pres.* DATE: *7/29/03* DAYTIME PHONE #: *561-373-9044*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (4/03)