

2002 UNIFORM BUSINESS REPORT (UBR)

1/2

FILED
Mar 10, 2002 8:00 am
Secretary of State

01-29-2002 90058 047 ****61.25

DOCUMENT # N95000003869

1. Entity Name

THE LAKELAND ASSOCIATION OF REALTORS FOUNDATION, INC.

Principal Place of Business

Mailing Address

820 SOUTH FLORIDA AVENUE
LAKELAND FL 33801

820 SOUTH FLORIDA AVENUE
LAKELAND FL 33801

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-6159096

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RILEY, KAREN S
820 SOUTH FLORIDA AVENUE
LAKELAND FL 33801

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, 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

TITLE	P	NAME	LORIO, JOE	☐ Delete
STREET ADDRESS	1902 S. FL AVE			
CITY-ST-ZIP	LAKELAND FL			
TITLE	SD	NAME	PICKARD, DONALD	☐ Delete
STREET ADDRESS	307 SOUTH FL AVE			
CITY-ST-ZIP	LAKELAND FL 33801			
TITLE	PE	NAME	TUBB, JOYCE	☐ Delete
STREET ADDRESS	PO BOX 7083			
CITY-ST-ZIP	LAKELAND FL 33807			
TITLE	T	NAME	REARDON, JAY	☐ Delete
STREET ADDRESS	832 S FLORIDA AVE			
CITY-ST-ZIP	LAKELAND FL 33801			
TITLE	D	NAME	TYNER, BOB	☒ Delete
STREET ADDRESS	2510 S FLORIDA AVE			
CITY-ST-ZIP	LAKELAND FL 33803			
TITLE	PD	NAME	MARTIN, BESTY	☒ Delete
STREET ADDRESS	30035 S. FLORIDA AVE.			
CITY-ST-ZIP	LAKELAND FL			

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PP	NAME	Lorio	☒ Change ☐ Addition
STREET ADDRESS	1902 S. Florida Ave			
CITY-ST-ZIP	LAKELAND, FL 33803			
TITLE	T	NAME	Don Pickard	☒ Change ☐ Addition
STREET ADDRESS	307 South FL AVE			
CITY-ST-ZIP	Lakeland, FL 33801			
TITLE	P	NAME	Joyce Tubb	☒ Change ☐ Addition
STREET ADDRESS	PO BOX 7083			
CITY-ST-ZIP	Lakeland, FL 33807			
TITLE	PE	NAME	Jay Reardon	☒ Change ☐ Addition
STREET ADDRESS	832 S. FL. Avenue			
CITY-ST-ZIP	Lakeland, FL 33801			
TITLE	S	NAME	Shawn McDonough	☐ Change ☒ Addition
STREET ADDRESS	2933 S Florida Ave #4			
CITY-ST-ZIP	Lakeland, FL 33803			
TITLE	D.	NAME	TONY FRIDOVICH	☐ Change ☒ Addition
STREET ADDRESS	2600 S. FL AVE			
CITY-ST-ZIP	LAKELAND, FL 33802			

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/02

863 687-6111

Date

Daytime Phone #

CR2E037 (9/01)