## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # N9600001648

1. Entity Name

## LAKEVIEW IN THE HILLS MOBILE HOMEOWNERS ASSOCIAT

Principal Place of Business 10515 US HIGHWAY 301 DADE CITY FL 33525

Mailing Address

10515 US HIGHWAY 301 DADE CITY FL 33525-1839

**FILED** May 08, 2000 8:00 am Secretary of State

05-08-2000 90103 031 \*\*\*\*61.25



Principal P	lace of Business		37908 Lake Gilbert Cir					
Suite, Apt. #, etc.  City & State		Suite. Apt. #, etc  Dade City FL  City & State  Country			DO NOT WRITE IN THIS SPACE			
				4. FEI Number 59-3362490		<u> </u>	pplied For	
				<del></del>			Not Applicable  8.75 Additional	
Zip	Country	33525	115A	5. Certificate	e of Status Desired	Fee Require		
	6. Name and Address of Current	Registered Agent		7. Name an	d Address of New Register	ed Agent		
			Name					
BRITTEN, VIRGINIA P			Street Address (P.O. Box Number is Not Acceptable)					
	VINGINIA P (E GILBERT CIRCLE		<u> </u>					
	Y FL 33525							
			City			FL   Zip Cod	ie	
The above	named entity submits this statement for	or the purpose of changing its	registered office or reg	gistered agent, or bo	oth, in the state of Florida.			
ONATION								
GNATURE .	Signature, typed or printed name of registered agent	and title if applicable (NOTE	E: Registered Agent signature n	equired when reinstating)	DA	ATE		
				<del></del> _				
	FILE NOW:			\$5.00 May Be		ck Payable to	)	
	FEE IS \$61.25	Trust Fund Contribi	ution.	Added to Fees	Departm	ent of State		
	OFFICERS AND DI	RECTORS	11.	ADDITIONS/CH	HANGES TO OFFICERS AND	DIRECTORS IN	¥ 10	
.E	PD	₩ Delete		D Q	7700071111	🔀 Change	☐ Addition	
<b>Λ</b> Ε	TINKER, ANNA			UNDA L	. TOMBLIN AKE GILBERT	a.i.		
reet address ' Y-ST- <b>Z</b> ip	37917 LAKE GILBERT CIRCLE			37915 L	AKE GIIDERI	سام معروب		
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ry-ST-ZIP	DADE CITY FL 33525					525		
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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:

April 21, 2000