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

DOCUMENT # N97000000275

1. Entity Name

Lake Crescent Pines East Homeowners Association, Inc.

DO NOT WRITE IN THIS SPACE

FILED

03 JAN -3 AM 10:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
500009804875
01/03/03--01028--001 **297.50

DO NOT WRITE IN THIS SPACE 02-03

2. Principal Place of Business	3. Mailing Address
P.O Box 121680	P.O. Box 121680
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Clermont, FL	City & State: Clermont, FL
Zip: 34712-1680 Country: US	Zip: 34712-1680 Country: US

4. FEI Number 59-3426910 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: Frederick E. Holmes

Street Address (P.O. Box Number is Not Acceptable): 10625 Crescendo Loop

City: Clermont FL

FL Zip Code: 34711-7896

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: Acting President Frederick E. Holmes 12-30-02

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

FEE IS $61.25
Initial or Amended UBR

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	President; Frederick E. Holmes P.O Box 121680 Clermont, FL 34712-1680
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary; Kriss Harrison P.O Box 121680 Clermont, FL 34712-1680
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer; Linda Smith-Holmes P.O Box 121680 Clermont, FL 34712-1680
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director; Kevin Davidson P.O Box 121680 Clermont, FL 34712-1680
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director; Mary Hoefling P.O Box 121680 Clermont, FL 34712-1680
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CR2E037B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Frederick E. Holmes Acting President 12-30-02 352-243-4516

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

jr 1/7