

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

**FILED**  
**Apr 21, 2003 8:00 am**  
**Secretary of State**

04-21-2003 91128 001 \*\*\*\*\*8.75  
04-21-2003 91128 002 \*\*\*\*\*61.25

**DOCUMENT # N97000003906**

1. Entity Name

**JUNIPER LAKE CONSERVANCY, INC.**



Principal Place of Business

**300 SQUIRREL RD  
DEFUNIAK SPRINGS FL 32433**

Mailing Address

**300 SQUIRREL RD  
DEFUNIAK SPRINGS FL 32433**

2. Principal Place of Business

**(Same)  
300 Squirrel Rd**

3. Mailing Address

**Same**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**DeFuniak Springs, FL**

City & State

**DeFuniak Springs, FL**

Zip

**32433**

Country

**USA**

Zip

**32433**

Country

**USA**

4. FEI Number **59-3528847**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**LEVY, CARLITA  
300 SQUIRREL RD  
DEFUNIAK SPRINGS FL 32433**

7. Name and Address of New Registered Agent

Name **Carlita Levy**  
Street Address (P.O. Box Number is Not Acceptable)  
**300 Squirrel Rd**  
City **DeFuniak Springs** **FL** Zip Code **32433**

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

Signature, typed or printed name of registered agent and title if 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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	LAFO, ARCH	
STREET ADDRESS	173 LAKE JUNIPER CIR.	
CITY-ST-ZIP	DEFUNIAK SPRINGS FL 32433	
TITLE	TD	<input type="checkbox"/> Delete
NAME	BUSH, BETTY	
STREET ADDRESS	78 SERENITY CIRCLE	
CITY-ST-ZIP	DEFUNIAK SPRINGS FL 32433	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PATTERSON, TOM	
STREET ADDRESS	1360 LONGLEAF DRIVE	
CITY-ST-ZIP	MONROE GA 30655	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	JOHNSON, DON	
STREET ADDRESS	305 MARION DR	
CITY-ST-ZIP	DEFUNIAK SPRINGS FL 32433	
TITLE	SD	<input type="checkbox"/> Delete
NAME	LEVY, CARLITA	
STREET ADDRESS	300 SQUIRRELL RD	
CITY-ST-ZIP	DEFUNIAK SPRINGS FL 32433	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MAY, HUGH	
STREET ADDRESS	74 SERENITY CIRCLE	
CITY-ST-ZIP	DEFUNIAK SPRINGS FL 32433	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Gordon Lawyer	
STREET ADDRESS	847 Squirrel Rd.	
CITY-ST-ZIP	DeFuniak Springs, FL 32433	
TITLE	TP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Same	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Donald Patterson	
STREET ADDRESS	827 Squirrel Rd.	
CITY-ST-ZIP	DeFuniak Springs, FL 32433	
TITLE	VP.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Bill Stevens	
STREET ADDRESS	350 Juniper Island Drive	
CITY-ST-ZIP	DeFuniak Springs, FL 32433	
TITLE	SD.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Same	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jack Bassett	
STREET ADDRESS	258 Marion Dr.	
CITY-ST-ZIP	DeFuniak Springs, FL 32433	

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]**

**4/17/03**

CR2E037 (10/02)