

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000005964

1. Entity Name

SEMINOLE MANOR RESIDENTS GROUP, INC.

FILED
Feb 29, 2000 8:00 am
Secretary of State

02-29-2000 90194 050 ****61.25

Principal Place of Business	Mailing Address
6160 LAWRENCE RD. LANTANA FL 33462	6160 LAWRENCE RD. LANTANA FL 33462-2140

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0878312		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
PUCKETT, DEBBIE 6160 LAWRENCE RD. LANTANA FL 33462		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEES IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
DP PUCKETT, DEBBIE 6160 LAWRENCE RD. LANTANA FL 33462	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD Trish Childers 420 Cheyenne Dr. Lantana, Fl. 33462 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
DVP HAPER, SUE 3925 TUSKEGEE RD. LANTANA FL 33462	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD Diane Schumacher 5 Topeka Rd. Lantana, Fl. 33462 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
DS LA BELLE, PAT 3814 NOWATA RD. LANTANA FL 33462	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD Dick VanMartin 3949 Tuskegee Dr. Lantana, Fl. 33462 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD Mary Jean Davis 3646 Kewanee Rd. Lantana, Fl. 33462 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD Stanley Taylor 436 Cheyenne Dr. Lantana, Fl. 33462 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD Marie Martinez 3944 Nowata Rd. Lantana, Fl. 33462 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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 REQUIRED 2/17/00 561-366-5543
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)

N9800005464

616751

Block 11. DS/T Change Title from DS to DS/T
Pat LaBelle
3814 Nowata Rd.
Lantana, FL. 33462