

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 16, 2002 8:00 am
Secretary of State

04-16-2002 90141 019 ****61.25

DOCUMENT # N99000000218

1. Entity Name

CYPRESS LAKES HOMEOWNERS ASSOCIATION OF LAKELAND, INC.

Principal Place of Business

Mailing Address

10000 U.S. HIGHWAY 98 NORTH
#303
LAKELAND FL 33809

10000 U.S. HIGHWAY 98 NORTH
#303
LAKELAND FL 33809

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2878564

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FORE, R. MARK, ESQ.
908 S FLORIDA AVENUE
SUITE 102
LAKELAND FL 33803

Name
CARSON E. SWARTZLANDER

Street Address (P.O. Box Number is Not Acceptable)

10300 US 98N, #1516

City

LAKELAND

FL

Zip Code

33809

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

Carson Swartzlander

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3-26-02

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PBD
NANGEL, LENNY
10300 US 98 N #1472
LAKELAND FL 33809 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VBD
CAROL STENGER
10300 US 98N, #1522
LAKELAND, FL 33809 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PBD
HOLZSCHUH, DICK
10000 US 98 N #402
LAKELAND FL 33809 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
BM
DON BENNEHOFF
10000 US 98N, #663
LAKELAND, FL 33809 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TBD
SWARTZLANDER, CARSON
10300 US 98 N #1516
LAKELAND FL 33809 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
BM
WALT LAVELLE
10300 US 98N, #1381
LAKELAND, FL 33809 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
BM
FICK, BOB
10000 U.S. HIGHWAY 98 NORTH, #1471
LAKELAND FL 33809 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
BM
DENNIS Mc LAUGHLIN
10300 US 98N, #1448
LAKELAND, FL 33809 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
BM
BENNEHOFF, SALLY
10000 US 98 NORTH #663
LAKELAND FL 33809 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
BM
PETER PALMER
10000 US 98N, #970
LAKELAND, FL 33809 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SBD
MCCLUSKEY, JEAN
10000 US 98 N #400
LAKELAND FL 33809 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
BM
PAUL WINIECKI
10000 US 98N, #641
LAKELAND, FL 33809 ☐ Change ☒ Addition

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:

Carson Swartzlander CARSON E. SWARTZLANDER (863) 859-4161

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)