

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P00000082937**

1. Entity Name

LYDEN MANAGEMENT, INC.**FILED****May 14, 2001 8:00 am**
Secretary of State

05-14-2001 90056 049 ***150.00

Principal Place of Business

**1600 ALABAMA DRIVE, THE ALABAMA NO 401
WINTER PARK FL 32789-2672**

Mailing Address

**1600 ALABAMA DRIVE, THE ALABAMA NO 401
WINTER PARK FL 32789-2672**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

P.O. Box 700**Winter Park, FL****32790****Orange**

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-8675595

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

**LOWMAN, WILLIAM R JR, ESQ
315 EAST ROBINSON STREET
LANDMARK CENTER ONE SUITE 600
ORLANDO FL 32801**

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	D LYDEN, JAMES P 1600 ALABAMA DRIVE, THE ALABAMA NO 401 WINTER PARK FL 32789-2672	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	D LYDEN, KRISTIN M 1600 ALABAMA DRIVE, THE ALABAMA NO 401 WINTER PARK FL 32789-2672	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **James P. Lyden - President - James P. Lyden**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)