

**FILED**  
**May 01, 2003 8:00 am**  
**Secretary of State**

0080989 AV

**THE REAL ESTATE CENTER OF LAKE COUNTY, INC.**



Mailing Address  
51 OLD MT DORA RD.  
EUSTIS FL

g Address 201 Floral Ave

Suite, Apt. #, etc.

Not Applicable
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Zip 32726	Country USA
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required —

7. Name and Address of New Registered Agent

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

City Eusti's

F1

Zip Code 38726

SIGNATURE Rebecca M. Peterson Rebecca M. Peterson Pres. 3/31/03  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing Trust Fund Contribution.**

**\$5.00** May Be  
Added to Fees

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P/VP/S/T	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	Rebecca McPherson		
STREET ADDRESS	201 Floral Ave		
CITY-ST-ZIP	EUSTIS FL 32726		

TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 607, 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: Rebecca McPherson Rebecca McPherson 3/31/03 357-6020  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)