

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2002 8:00 am
Secretary of State

09-17-2002 90093 031 ***550.00

DOCUMENT # P01000093963

1. Entity Name

SOUTHERN HOMES OF LAKE CITY, INC.

Principal Place of Business

4760 US HWY 90 WEST
 LAKE CITY FL 32055

Mailing Address

4760 US HWY 90 WEST
 LAKE CITY FL 32055

2. Principal Place of Business

3752 US Hwy 90W
 Suite, Apt. #, etc.

3. Mailing Address

3752 US Hwy 90W
 Suite, Apt. #, etc.

City & State

LAKE CITY, FL

City & State

LAKE CITY, FL

4. FEI Number

SA-3760779

Applied For
 Not Applicable

Zip

32055

Country

COLUMBIA

Zip

32055

Country

COLUMBIA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

LIPTHROTT, WILLIAM M
 4760 US HWY 90 WEST
 LAKE CITY FL 32055

7. Name and Address of New Registered Agent

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. 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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

TITLE: PRESIDENT
 NAME: WILLIAM M. LIPTHROTT
 STREET ADDRESS: RT 12 BOX 43
 CITY-ST-ZIP: LAKE CITY, FL 32055

TITLE: ☐ Delete
 NAME: ☐ Delete
 STREET ADDRESS: ☐ Delete
 CITY-ST-ZIP: ☐ Delete

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 STREET ADDRESS: ☐ Delete
 CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: VICE PRES., SEC, TREAS.
 NAME: KIM P. LIPTHROTT
 STREET ADDRESS: RT 12 BOX 43
 CITY-ST-ZIP: LAKE CITY, FL 32055

TITLE: ☐ Change ☐ Addition
 NAME: ☐ Change ☐ Addition
 STREET ADDRESS: ☐ Change ☐ Addition
 CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
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 NAME: ☐ Change ☐ Addition
 STREET ADDRESS: ☐ Change ☐ Addition
 CITY-ST-ZIP: ☐ Change ☐ Addition

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: *William M. Lipthrott* PRESIDENT William M. Lipthrott 9/11/02 (386) 754-1444

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)