## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)



## FILED Jan 21, 2003 8:00 am Secretary of State

1. Entity Name LAKE JOSEPHINE INC.					01-21-2003 90210 048 ***150.00	
Principal Place of Business 3906 MADRID COURT PUNTA GORDA FL 33950		Mailing Address 3906 MADRID COURT PUNTA GORDA FL 33950		•		
2. Principal	Place of Business	3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES	
City & State		City & State			4. FEI Number 65-0451781 Applied For	
Zip	Country	Zip	Country	- 12	5. Certificate of Status Desired \$8.75 Additional	
	6. Name and Address of Current	Registered Agent	<del>-1</del>		Fee Required	
NAUMAN	NAUMANN, THEODORE R			)	7. Name and Address of New Registered Agent	
3906 MA	DRID COURT GORDA FL 33950		Street	Street Address (P.O. Box Number is Not Acceptable)		
			City	<del>-</del>	FL Zip Code	
8. The above the obliga	e named entity submits this statement for tions of registered agent.	the purpose of changing its	s registered office	or registered	d agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent a					
Afte Make Chec	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of	State	TE: Registered Agent sign	and required with	9. Election Campaign Financing Trust Fund Contribution.   Added to Fees	
10.	OFFICERS AND I	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NAUMANN, THEODORE R 3906 MADRID COURT PUNTA GORDA FL 33950	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Naumann, Shirley ann 3906 Madrid Court Punta Gorda Fl 33950	☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Bishton, Harry 4912 Forest Grove FT. Wayne in 46835	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ertify that the information supplied with th	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: