

2002 UNIFORM BUSINESS REPORT (UBR)

10 of 3

DOCUMENT # P93000082795

1. Entity Name

EMERALD LAKE MOBILE HOME SALES, INC.

FILED

02 AUG -9 AM 9:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business 200 JEREMY DR DAVENPORT FL 33837 US	Mailing Address 200 JEREMY DR DAVENPORT FL 33837 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE
07/29/02 90005 008 150.00
4. FEI Number 59-3215044
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	
STEVENS, CHARLES H 200 JEREMY DRIVE DAVENPORT FL 33837		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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PVTS STEVENS, CHARLES H. 200 JEREMY DR DAVENPORT FL 33837 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:

Charles H. Stevens

0.0 2142212 863-424-5266

203



Parks ∞ Realty ∞ Mobile Home Sales

August 7, 2002

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
ATTN: REINSTATEMENT SECTION

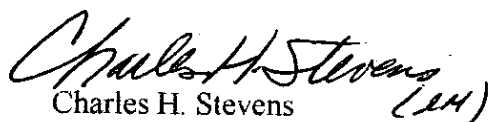
RE: FEI# 59-3215402
FEI# 59-3215044

Dear Sirs:

We are requesting a waiver for the late fee for the above referenced reports.

Enclosed is a copy of the letter that we sent dated July 24, 2002, stating that this was the first notification that we received concerning filing of these reports. We have filed these reports and paid the fees of \$150.00 for each report.

Sincerely,


Charles H. Stevens
Owner

enclosure

MAILED
7-25
3083

Emerald Lakes

Parks ∞ Realty ∞ Mobile Home Sales

July 24, 2002

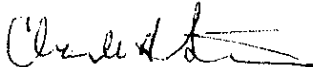
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32303-1500

Re: FEI # 59-3215402
FEI # 59-3215044

Dear Sirs:

Enclosed is my 2002 Uniform Business Reports. This is the first notification that I received concerning filing of these reports. Enclosed are my checks for each report.

Sincerely,



Charles H. Stevens
Owner

enclosures