

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90448 042 ***150.00

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1. Entity Name
LAKE LINDA CIRCLE DEVELOPMENT CORPORATION



Principal Place of Business
2036 LAKE LINDA CIR
LUTZ FL 33549
US

Mailing Address
2036 LAKE LINDA CIR
LUTZ 1
LUTZ FL 33558
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3373584

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

OLESKI, RONALD
2036 LAKE LINDA CIR
LUTZ FL 33549

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Delete
NAME LAVALLEY, FRANCIS
STREET ADDRESS 2036 LAKE LINDA CIR
CITY-ST-ZIP LUTZ FL 33549

TITLE D WNDKIEWICZ, STAN ☐ Change ☒ Addition
NAME 2036 LAKE LINDA CIRCLE
STREET ADDRESS LUTZ, FL 33558
CITY-ST-ZIP

TITLE TD ☒ Delete
NAME KITCHENS, LYNN
STREET ADDRESS 2036 LAKE LINDA CIRCLE
CITY-ST-ZIP LUTZ FL 33549

TITLE TD HERRNSTEEN, ROGER ☐ Change ☒ Addition
NAME 2036 LAKE LINDA CIRCLE
STREET ADDRESS LUTZ, FL 33558
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME SMITH, RITA
STREET ADDRESS 2036 LAKE LINDA CIRCLE
CITY-ST-ZIP LUTZ FL 33558

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

TITLE D ☐ Delete
NAME BARKER, RAYMOND
STREET ADDRESS 2036 LAKE LINDA CIRCLE
CITY-ST-ZIP LUTZ FL 33558

TITLE PD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☒ Delete
NAME OLESKI, RONALD
STREET ADDRESS 2036 LAKE LINDA CIR
CITY-ST-ZIP LUTZ FL 33558

TITLE VD ~~SMITH~~ SCHMITZ, LARRY ☐ Change ☒ Addition
NAME 2036 LAKE LINDA CIRCLE
STREET ADDRESS LUTZ, FL 33558
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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: *Roger J. HerrNSTEEN* **Treasurer**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **2-6-03 813-909-2547**
Date **Daytime Phone #**

CR2E034 (10/02)