

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90182 040 ***150.00

019444 AV

DOCUMENT # P97000028930

1. Entity Name
LAKES OF SUNRISE REALTY, INCORPORATED



Principal Place of Business
**5719 N.W. 54TH PLACE
CORAL SPRINGS FL 33067**

Mailing Address
**5719 N.W. 54TH PLACE
CORAL SPRINGS FL 33067**



2. Principal Place of Business
17151 S.E. 93 Yonder Circle
Suite, Apt. #, etc.

3. Mailing Address
17151 S.E. 93 Yonder Circle
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
The Villages, FL
Zip
32162
Country
USA

City & State
The Villages, FL
Zip
32162
Country
USA

4. FEI Number
65-0745867

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SOSH, SUSAN
5719 N.W. 54TH PLACE
CORAL SPRINGS FL 33067**

7. Name and Address of New Registered Agent

Name
SOSH, SUSAN
Street Address (P.O. Box Number is Not Acceptable)
17151 S.E. 93 Yonder Circle
City
The Villages **FL** Zip Code
32162

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 _____ (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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DPST
SOSH, SUSAN
5719 N.W. 54TH PLACE
CORAL SPRINGS FL 33067** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DPST
SOSH, SUSAN
17151 S.E. 93 Yonder Circle
The Villages, FL 32162** ☒ Change ☐ Addition

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

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

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TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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: **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/03 352-259-4811
Date Daytime Phone #

CR2E034 (10/02)