

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 27, 2002 8:00 am**  
**Secretary of State**

08-27-2002 90120 048 \*\*\*150.00

**DOCUMENT # P97000076109**

1. Entity Name

**LANCASTER FINANCIAL CORP.**

**DO NOT WRITE IN THIS SPACE**

**976851**

2. Principal Place of Business  
**908 CYPRESS DRIVE**

3. Mailing Address  
**908 CYPRESS DRIVE**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
**DELRAY BEACH, FL**

City & State  
**DELRAY BEACH, FL**

4. FEI Number  
**22-3541569**

Applied For

Not Applicable

Zip  
**33483**

Country  
**PALM BEACH**

Zip  
**33483**

Country  
**PALM BEACH**

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

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name **JAMES D. TERLIZZI**

Street Address (P.O. Box Number is Not Acceptable)

**908 CYPRESS DRIVE**

City **DELRAY BEACH**

**FL**

Zip Code  
**33483**

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.

SIGNATURE **JAMES D. TERLIZZI**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**January 1 - May 1 Fee is \$150.00  
After May 1 Fee is \$550.00  
Amended UBR is \$81.25  
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  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**(P) - JAMES D. TERLIZZI  
908 CYPRESS DRIVE  
BOCA RATON, FL 33483**

TITLE  
NAME  
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CITY - ST - ZIP

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**DO NOT WRITE  
IN THIS SPACE**

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

**SIGNATURE:**

**JAMES D. TERLIZZI**

**877-386-3123**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

*Attachment*

**LANCASTER FINANCIAL CORP.**

908 Cypress Drive  
Delray Beach, FL 33483

Telephone (877) FUND 123  
Telecopier (877) FUND 124  
E-mail JTerlizzi @ Lumpsum.com

August 19, 2002

VIA Regular Mail

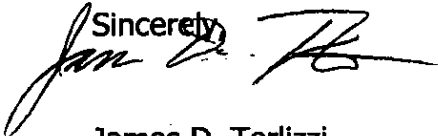
Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: Document Number P97000076109  
Lancaster Financial Corp.  
UBR Filing

I have just recently discovered that I have not received the UBR Filing document for the above referenced entity and have spoken with your Customer Service regarding this matter. So you are aware, since I have not received any UBR notification kindly consider the enclosed check for \$150 as payment in full for the Annual Report and the Supplemental Corporate Fee.

If you have any questions, please feel free to contact me at (877) 386-3123.

Sincerely,



James D. Terlizzi  
President

Enclosures

JDT:sje