

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2000 8:00 am
Secretary of State

04-11-2000 90058 014 ***158.75

DOCUMENT # P98000038475

1. Entity Name

LADY LAKE EXPRESS CORP.

Principal Place of Business

Mailing Address

13590 US 441 / 27
 LADY LAKE FL 32159

10261 W BROWARD BLVD
 PLANTATION FL 33324-2114

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0835238

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COSTELLO, JAMES J JR
10261 W BROWARD BLVD
PLANTATION FL 33324

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.

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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: COSTELLO, JAMES J JR STREET ADDRESS: 10261 W BROWARD BLVD CITY-ST-ZIP: PLANTATION FL 33324	<input type="checkbox"/>	NAME: COSTELLO, JAMES J JR STREET ADDRESS: 10261 W BROWARD BLVD CITY-ST-ZIP: PLANTATION FL 33324	<input type="checkbox"/>
NAME: COOK, KEVIN C STREET ADDRESS: 13030 NW 5TH ST CITY-ST-ZIP: PLANATION FL	<input type="checkbox"/>	NAME: COOK, KEVIN C STREET ADDRESS: 13030 NW 5TH ST CITY-ST-ZIP: PLANATION FL	<input type="checkbox"/>
NAME: MILLER, JEREL M STREET ADDRESS: 9830 SW 15TH DR CITY-ST-ZIP: DAVIE LF	<input type="checkbox"/>	NAME: DVT MILLER, JEREL M. STREET ADDRESS: 900 GROVESMERE LOOP CITY-ST-ZIP: OCOCHEE, FL 34761	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: [Blank] STREET ADDRESS: [Blank] CITY-ST-ZIP: [Blank]	<input type="checkbox"/>	NAME: DS JAMES J. Costello SR. STREET ADDRESS: 6801 NW 6TH CT. CITY-ST-ZIP: PLANTATION, FL 33317	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: [Blank] STREET ADDRESS: [Blank] CITY-ST-ZIP: [Blank]	<input type="checkbox"/>	NAME: [Blank] STREET ADDRESS: [Blank] CITY-ST-ZIP: [Blank]	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: [Blank] STREET ADDRESS: [Blank] CITY-ST-ZIP: [Blank]	<input type="checkbox"/>	NAME: [Blank] STREET ADDRESS: [Blank] CITY-ST-ZIP: [Blank]	<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:

James J. Costello Jr
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/21/00
 Date

954 423 9030
 Daytime Phone #

CR2E034 (9/99)