

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000055508

1. Entity Name

LAKEHURST DEVELOPERS, INC.

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90298 039 ***150.00

645362



DO NOT WRITE IN THIS SPACE

Principal Place of Business
735 NORTH THORNTON AVENUE
ORLANDO FL 32803

Mailing Address
735 NORTH THORNTON AVENUE
ORLANDO FL 32803

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

City & State

4. FFI Number **59-3537314**
Applied For
Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent
PIERMONT, SUNIA
735 NORTH THORNTON AVENUE
ORLANDO FL 32803

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City 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: New Registered Agent signature required when changing)

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, 2001 Fee will be \$650.00
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

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	P PIERMONT, SUNIA 735 NORTH THORNTON AVENUE ORLANDO FL 32803 ☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D PRIETO, MARIO 735 NORTH THORNTON AVENUE ORLANDO FL 32803 ☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VP/T/D John T. Callahan, III 80 First Street Bridgewater, MA 02324 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	S/D M. Shane Murray 1399 West State Road 434 Longwood, FL 32750 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D Stephen R. Callahan 80 First Street Bridgewater, MA 02324 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ 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 I am empowered.

CR2E034 (10/00)