

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 25, 2003 8:00 am
Secretary of State

08-25-2003 90101 010 ***150.00

DOCUMENT # P99000040105

1. Entity Name
LAND-O-LAKES ESTATES, INC.



Principal Place of Business
7797 NO. UNIVERSITY DR.
TAMARAC FL 33321

Mailing Address
PO BOX 8590
CORAL SPRINGS FL 33075

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 **65-0917060**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

POLLOCK, RICHARD C
7797 NO. UNIVERSITY DR.
TAMARAC FL 33321

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 \$550.00

After September 10, 2003 Fee will be \$750.00

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 **P** ☐ Delete
NAME **POLLOCK, RICHARD C**
STREET ADDRESS **7797 N. UNIVERSITY DR. STE 105**
CITY-ST-ZIP **FORT LAUDERDALE FL 33321**

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

TITLE **VP** ☐ Delete
NAME **LEFORT, JUDY J**
STREET ADDRESS **4300 NW 92 TERR**
CITY-ST-ZIP **CORAL SPRINGS FL 33065**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8/25/03

954-726-2537

CR2E034 (4/03)

Attachment

80140053
P99000040105

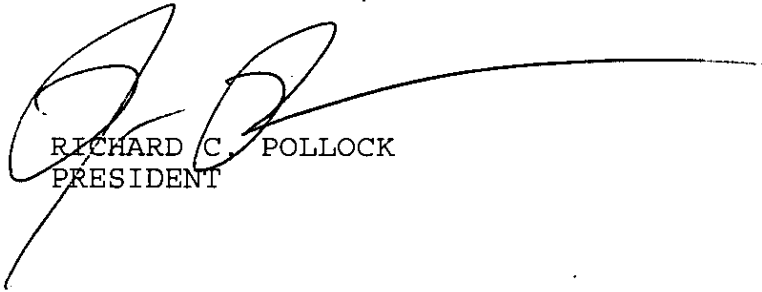
LAND-O-LAKES ESTATES, INC.
7797 N UNIVERSITY DR STE 105
TAMARAC, FLORIDA 33321

RE: DOC # P99000040105

GENTLEMEN,

I AM THE PRESIDENT OF LAND-O-LAKES ESTATES, INC. THE CORPORATION
DID NOT RECEIVE ANY PRIOR NOTICES (UBR) TO RENEW OUR CORPORATION.
ENCLOSED PLEASE FIND OUR COMPLETED UBR AND OUR \$ 150.00 CHECK. THEREFORE,
WE REQUEST THAT THE LATE FILING PENALTY BE WAIVED.

VERY TRULY YOURS,



RICHARD C. POLLOCK
PRESIDENT