

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000076631

1. Entity Name  
RENT TO OWN OF LAKE LAND, INC.

Principal Place of Business  
218 EAST PINE STREET  
SUITE 4  
LAKE LAND FL 33801

Mailing Address  
218 EAST PINE STREET  
SUITE 4  
LAKE LAND FL 33801

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.  
1004 W. MAIN ST

Suite, Apt. #, etc.

City & State  
LAKE LAND, FL

City & State  
LAKE LAND, FL

Zip  
33815

Country  
USA

Zip  
33815

Country  
USA

4. FEI Number 59-3576614

Applied For  
Not Applicable

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

Additional Fee Required

6. Name and Address of Current Registered Agent

MASSIMINI, MICHAEL P  
5725 N. NEBRASKA AVE  
TAMPA FL 33604

7. Name and Address of New Registered Agent

Name Robert C. LYNCH

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

1004 W. MAIN ST

City Lakeland

FL

Zip Code 33815

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 Robert C. Lynch

Robert C. Lynch

8/28/01

Signature, typed or printed name of registered agent and title (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 \$550.00  
After September 12, 2001 Fee will be \$750.00  
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 PD  
NAME LYNCH, ROBERT C  
STREET ADDRESS 218 EAST PINE STREET  
CITY-ST-ZIP LAKE LAND FL 33801 ☐ Delete

TITLE VD  
NAME BERNHARD, AMITY  
STREET ADDRESS 218 EAST PINE STREET  
CITY-ST-ZIP LAKE LAND FL 33801 ☐ Delete

TITLE VD  
NAME RAND, JAMIE A  
STREET ADDRESS 218 EAST PINE STREET  
CITY-ST-ZIP LAKE LAND FL 33801 ☒ Delete

TITLE STD  
NAME WHITACRE, WHITNEY W  
STREET ADDRESS 218 EAST PINE STREET  
CITY-ST-ZIP LAKE LAND FL 33801 ☐ Delete

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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

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: Robert C. Lynch PRES.

Date

Daytime Phone #

FILED  
Sep 05, 2001 8:00 am  
Secretary of State

09-05-2001 90093 047 \*\*\*550.00

00000000



DO NOT WRITE IN THIS SPACE

0122846 AT

CR2034 (5/01)