

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000094691

1. Entity Name
LAKEBROOK PARK APARTMENTS GENERAL PARTNER,
INC.



Principal Place of Business
11300 FOURTH STREET NORTH
SUITE 200
ST. PETERSBURG, FL 33716-2940

Mailing Address
11300 FOURTH STREET NORTH
SUITE 200
ST. PETERSBURG, FL 33716-2940

FILED
Feb 02, 2004 08:00 AM
Secretary of State



01062004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3606833

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CHADWICK, JAMES M
11300 FOURTH STREET NORTH
SUITE 200
ST. PETERSBURG, FL 33716-2940

**DO NOT WRITE
IN THIS SPACE**

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 \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000024794
02/02/04-80078-025 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DP
CHADWICK, HARRY R JR.
11300 FOURTH STREET NORTH, SUITE 200
ST. PETERSBURG, FL 337162940

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DST
CHADWICK, JAMES M
11300 FOURTH STREET NORTH, SUITE 200
ST. PETERSBURG, FL 337162940

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

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 1 changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

James M Chadwick

Date

Daytime Phone #

4/14/04 727-578-1174