

DOCUMENT # P99000098894

1. Entity Name

LAKESIDE BUILDERS OF THE TREASURE COAST, INC.

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

02-11-2000 90013 008 ***150.00

Principal Place of Business

Mailing Address

801 154 AVENUE
VERO BEACH FL 32966

801 154 AVENUE
VERO BEACH FL 32966-3506



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

801 154th Ave

202 Liberty St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Vero Beach, FL

City & State

Vero Beach, FL

4. FEI Number

59-367228

Applied For

Not Applicable

Zip

32966

Country

Indian River

Zip

32966

Country

Indian River

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COFFEY, RICHARD
801 154 AVENUE
VERO BEACH FL 32966

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, 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

TITLE D ☐ Delete

NAME COFFEY, RICHARD

STREET ADDRESS 801 154 AVENUE
CITY-ST-ZIP VERO BEACH FL 32966

TITLE V P ☐ Delete

NAME COFFEY, SANDY

STREET ADDRESS 202 Liberty St.
CITY-ST-ZIP Vero Beach, FL 32966

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

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

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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:

SANDY COFFEY

SANDY COFFEY 2-6-00 561-794-276

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #