2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 220546

Entity Name: THE VILLAGES OF LAKE-SUMTER, INC.

FILED Apr 29, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1100 MAIN ST 1100 MAIN ST

LADY LAKE, FL 32159 US THE VILLAGES, FL 32159 US

Current Mailing Address: New Mailing Address:

1100 MAIN ST 1100 MAIN ST

LADY LAKE, FL 32159 US THE VILLAGES, FL 32159 US

FEI Number: 59-0883380 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BURNSED, DEWEY

1000 W. MAIN STREET

LEESBURG, FL 32748 US

BURNSED, R. DEWEY

976 DEL MAR DRIVE

THE VILLAGES, FL 32159 US

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: R. DEWEY BURNSED 04/29/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: PD (X) Change () Addition Name: MORSE, H GARY, Name: MORSE, H. GARY,

 Address:
 1100 MAIN ST
 Address:
 1100 MAIN ST

 City-St-Zip:
 LADY LAKE, FL
 City-St-Zip:
 THE VILLAGES, FL 32159

Title: S () Delete Title: SD (X) Change () Addition Name: BURNSED, DEWEY, Name: BURNSED, R. DEWEY

Address: 1000 W. MAIN STREET Address: 976 DEL MAR DRIVE
City-St-Zip: LEESBURG, FL City-St-Zip: THE VILLAGES, FL 32159

Title: T () Delete Title: TD (X) Change () Addition

 Name:
 WISE, JOHN F,
 Name:
 WISE, JOHN F

 Address:
 1100 MAIN ST
 Address:
 1100 MAIN ST

City-St-Zip: LAKEY LAKE, FL City-St-Zip: THE VILLAGES, FL 32159

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 MORSE, MARK G
 Name:
 MORSE, MARK G

 Address:
 1100 MAIN ST
 Address:
 1100 MAIN ST

 City-St-Zip:
 LADY LAKE, FL 32159
 City-St-Zip:
 THE VILLAGES, FL 32159

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: H. GARY MORSE PD 04/29/2003