2001 UNIFORM BUSINESS REPORT (UBR) FILED May 21, 2001 8:00 am 605 246 DOCUMENT # Secretary of State Bahama Family Island Promotion Board, Inc. 05-21-2001 90364 023 ***150.00 Principal Place of Business Mailing Address A0070978 2. Principal Place of Business 3. Mailing Address 19495 Biscaune BLUM Same as Business Suite, Apt. #. etc Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE 809 4. FEI Number Applied For City & State City & State FL <u> 59 - 1881976</u> Aventura, Not Applicable 33180 Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Koch, Barbara Street Address (P.O. Box Number is Not Acceptable) Biscayne BLUD suite809 Aventura, FL 33180 Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 \$45 After MAY:1, 2001; Fee will be \$550.00 \$1 Make Creck Payable to Department of State 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filling requirement and elects to do so. \hat{n} Trust Fund Contribution. Added to Fees (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (11/00) ☐ Change ☐ Addition TITLE ☐ Delete TITLE Mullin, George The cove of Eleuthera NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ELCUTHER, Bahamas Change Addition Delete TITLE ALBURY, MONTY GREEN TURTLE CLUB NAME STREET ADDRESS STREET ADDRESS City-ST-7IP CITY-ST-ZIP Abaco, Bahamas Change Addition TITLE Defete _ TATLE Symonek, NETTIE NAME NAME Different of Abaco, Bahamas STREET ADDRESS STREET ADDRESS CITY - ST - 715 CITY-ST-ZIP ☐ Change Addition Delete TITI F TITLE PFLUEGER akarlie Hotel Peace A Plenty Pobert Misske Treasur Cay Hotel Treasur Cay, Abaro, Bahane NAME NAME STREET ADDRESS STREET ACCRESS Exuma,_ CITY-ST-ZIP City-ST-ZiP ☐ Addition ☐ Delete TITLE Roberts, CRaig NAME NAME RESORT TREasure Cay Re Abaco, Bahamas STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change Addition Lexion, Manny NAME NAME Abaco Bead Resort STREET ADDRESS STREET ADDRESS Abaco, Dahamas Harbour CITY-ST-ZIP CITY-ST-ZIP. 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: SIGNATURE AND TYPED OR PRINTED NAME OF JIGNING OFFICER OR DIRECTOR Date Daylime Phone