2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 720601 May 08, 2000 8:00 am Secretary of State 1. Entity Name CHATEAUX DE BARDMOOR, INC., NO. 6, A CONDOMINIUM 05-08-2000 90118 005 ****61.25 Principal Place of Business Mailing Address 8300 BARDMOOR BLVD. 8300 BARDMOOR BLVD LARGO FL 33777 APT 201 LARGO FL 33777-2020 US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2110099 Not Applicable Zip Country 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 Name Street Address (P.O. Box Number is Not Acceptable) MERKEY, JANE 8300 BARDMOOR BLVD **APT 201** City **LARGO FL 33777** 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 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Change TITLE " TITLE RON SEICHKO 8300 BARDMOOR BLUD NAME SCHULTZ EBIC H NAME STREET ADDRESS STREET ADDRESS 2331 BEELEAIR RD 506 CITY-ST-ZIP CITY-ST-ZIP CLEARWATER, FL 00000 33774 ☐ Addition Delete TITLE TITLE NAME PLANINSHEK, ROBERT NAME STREET ADDRES 8300-BARDMOOR BLVD., APT-208-STREET ADDR CITY-ST (7) CITY-ST-ZIP ST PETERSBURG FL 33777 ☐ Addition ☐ Change DS ☐ Delete TITLE TITLE NAME NAME MERKEY, JANE STREET ADDRESS STREET ADDRESS 8300 BARDMOOR BLVD #201 CITY-ST-ZIP CITY-ST-ZIP **LARGO FL 33777** Change ☐ Addition W ☐ Delete TITLE NAME NAME LUNDBERG, TED STREET ADDRESS STREET ADDRESS 8300 BARDMOOR BLVD 104 CITY-ST-ZIP CITY-ST-ZIP **LARGO FL 33777** TITLE TITLE NAME SILVER, DEAN STREET ADDRESS STREET ADDRESS 8300 BARDMQOR BLVD., APT 109 CITY-ST-ZIP CITY-ST-ZIP **LARGO FL 33777** Addition TITLE TITLE NAME DUNBAR, CHARLES NAME STREET ADDRESS STREET ADDRESS 884 BAYPQINT DR. CITY-ST-ZIP CITY-ST-ZIP MADEIRA BEACH FL 33778 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHNS MILLOUR RETAILER MERKEY 3/31/50 727-393-0349