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2002 NOT FOR DROEST CORDORATION

UN	NIFORM BUSI	VESS	REPORT	Γ (Ù	BR)	_ Ap:	r 25, 200	3 8:00) am	
DOCUMENT # 730250 1. Entity Name							Apr 25, 2003 8:00 am Secretary of State 04-25-2003 90275 005 ****61.25			
SADDLEB S ASSOCI	ROOK GOLF AND COUNT IATION, INC.	TRY CLUB	Property o	WNER						
Principal Plac P.O. BOX 7124 WESLEY CHAP		g Address DX 7124 Y CHAPEL FL 33543	1							
Principal Place of Business 3. Mailing Address										
Suite, Apt. #, etc.			ite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & State C			City & State			4. FEI Number 5	9-2113734		oplied For	
Zip	Country	Country			5. Certificate of S	5. Certificate of Status Desired S8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent						7. Name and Add	ress of New Registered	d Agent		
					Name					
HASELTINE, BRUCE 5136 LONDONDERRY LANE					Street Address (P.O. Box Number is Not Acceptable)					
WESLEY CHAPEL FL 33543										
					City	City FL Zip Code				
	named entity submits this stateme	nt for the purp	ose of changing its	registere	ed office or regis	stered agent, or both, in	the State of Florida. I ar	n familiar with,	and accept	
the obligat	ions of registered agent.									
0.00	Burn Mit		Bruce Ha	sel	tines D	resident				
SIGNATURE Bruce Haseltines. President Stignature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE										
		_ _	<u> </u>		<u></u>		1			
FILE NOW: FEE IS \$61.25			9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS				11.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	DP Delete TITL				☐ Change ☐ Addition					
NAME	HASELTINE, BRUCE			NAM					İ	
STREET ADDRESS	5136 LONDONDERRY LANE				ET ADDRESS					
CITY-ST-ZIP	WESLEY CHAPEL FL 33543	 		CITY	-ST-ZIP		_ _		, _	
TITLE	DVP		Delete	TITLE	ſ			Change	☐ Addition	
NAME	DOMINO, DAVID			NAMI	- I					
STREET ADDRESS	5425 SADDLEBROOK WAY	m		STRE	ET ADDRESS	بپد ۔۔۔۔				

WESLEY CHAPEL FL 33543 DST TITLE Delete TITLE ☐ Change ☐ Addition REEVES, MARK NAME NAME **5236 SADDLEBROOK WAY** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **WESLEY CHAPEL FL 33543** CITY-ST-ZIP Addition TITLE 🗷 Delete TITLE ☐ Change CERRITO, STEVEN NAME NAME Foster, Nancy STREET ADDRESS 5049 QUAIL COVE STREET ADDRESS 5485 Saddlebrook Way CITY-ST-ZIP **WESLEY CHAPEL FL 33543** CITY-ST-ZIP Wesley Chapel, FL 33543 Change M Delete TITLE TITLE Addition BALASSAITIS, KATHLEEN (KAY) NAME NAME STREET ADDRESS 5102 QUAIL COVE STREET ADDRESS Reno, Norma CITY-ST-ZIP WESLEY CHAPEL FL 33543 CITY-ST-ZIP 29430 Holly Court Wesley Chapel, FL 33543 Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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.

REQUIFETTCe Haseltine/President **SIGNATURE**