2001 UNIFORM BUSINESS REPORT (UBR)

May 22, 2001 8:00 am Secretary of State DOCUMENT # 734397 04-18-2001 90028 029 ****61.25 MINI-FARMS PROPERTY OWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address P.O. BOX 1289 P.O. BOX 1289 CRYSTAL RIVER FL 34423 CRYSTAL RIVER FL 34423 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 51-0189511 Not Applicable. Country \$8.75 Additional Zip Country 7ip 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) ELKINS, BARBARA A 6332 N GOLD LEAF POINT **DUNNELLON FL 34433** 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 DATE 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be 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. Addition Change : Delete TITLE TITLE MAYER PAUL 1530 N. CAESAR PT. THOMAS, GARY D NAME NAME STREET ADDRESS STREET ADDRESS 7850 W. CRINOLINE LN CITY-ST-ZIP CITY-ST-ZIP **DENNELLON FL 34433** Change ☐ Addition Delete TITLE HARVEY, MORRIS NAME NAME STREET ADDRESS STREET ADDRESS 8055 N DACCA TERR CITY-ST-ZIP CITY-ST-ZIP **DUNNELLON FL 34433** Change Addition **5** Delete TITLE TITI F SATTERWHITE, JAMES NAME NAME STREET ADDRESS 7145 N CAESAR POINT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DUNNELLON FL 34433 D**elete TITLE TITLE HULSEBUS, GAYCORD NAME STREET ADDRESS STREET ADDRESS 8709 N. ZAVAL AVE CITY-ST-ZIP CITY-ST-ZIP 34433 **DUNNELLON FL 34433** TITLE TITLE ☐ Addition Delete MULVIE, SHARON NAME NAME STREET ADDRESS STREET ADDRESS 7360 W COPENHAGEN ST CITY-ST-ZIP CITY-ST-ZIP DUNELLON FL 34433 TITLE Delete ☐ Addition Change COBURN, ELLEN NAME NAME STREET ADDRESS 6721 COPENHAGEN ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DUNNELLON FL 34433** 12. I hereby certify that the informer indicated on this report or supplied the corporation or the receive changed, or on an attachment. on 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 mental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director 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 or trustee empowered to exertify an address, with all other SIGNATURE:

FILED