2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address

SIGNATURE:

FILED DOCUMENT # 747527 May 02, 2000 8:00 am 1. Entity Name Secretary of State EAST LAKE WOODLANDS CONDOMINIUM UNIT FOUR ASSOCI 05-02-2000 90142 006 ****61.25 Principal Place of Business Mailing Address 905 E M. L. KING JR. DR 316 MARTHA LANE OLDSMAR FL 34677 #265 TARPON SPRINGS FL 34689 3. Mailing Address III 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 32708 32708 Applied For City & State 4. FEI Number City & State 59-1954080 Not Applicable ALM HARBO. \$8.75 Additional Country 5. Certificate of Status Desired 34684 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent 5Rown et Address (P.O. Box Number is Not Acceptable) ALIBER CONDO NGT RESOURCE PROPERTY MANAGEMENT 103 SW CLEVELAND AVE **LARGO FL 34640** 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 Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Addition TITLE ☐ Delete TITLE TRICK, GILBERT NAME TRICK, GILBERT NAME 201 MARTHA LANE STREET ADDRESS STREET ADDRESS 306 MARTHA LANE ORDS MAR FL CITY-ST-ZIP CITY-ST-ZIP OLDSMAR FL **Addition** ☐ Change TITLE Delete TITLE DIECKMAN, KAREN NAME NAME SECO, JOE STREET ADDRESS 310 MARTHA LANE STREET ADDRESS 107 MARTHA LANE CITY-ST-ZIP CITY-ST-ZIF O-LD 5-MAR OLDSMAR FL -■ Addition Change Change TITLE VΡ ☐ Delete NAME SCHROEDER, WANDELL STREET ADDRESS STREET ADDRESS 103 MARTHA LANE CITY-ST-ZIP CITY-ST-ZIP OLSDMAR FL ☐ Addition Change TITLE Delete TITI F NAME BUNDY, WARREN STREET ADDRESS STREET ADDRESS 114 MARTHA LANE CITY-ST-ZIP CITY-ST-ZIP OLDSMAR FL XX Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME RUUGE-ARONSON, MARION STREET ADDRESS STREET ADDRESS 208 MARTHA LANE CITY-ST-ZIP CITY-ST-ZIP OLDSMAR FL Addition (☐ Delete TITLE TITLE FARRELL, BILL NAME NAME 101 MARTHA LANE STREET ADDRESS STREET ADDRESS OLDSMAR 34677 CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 chapted or on an attachment with an address with all other like participated.

MINCE GILBERT TRICK