2001 UNIFORM BUSINESS REPORT (UBR)

Mar 02, 2001 8:00 am Secretary of State DOCUMENT # 770175 * 1 1. Entity Name 03-02-2001 90079 019 ****61.25 CHARLESTON ON THE GREEN CONDOMINIUM ASSOCIATION, Principal Place of Business Mailing Address 611 S FEDERAL HWY PO BOX 1770 HOBE SOUND FL 33475 STE C STUART FL 34994 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2381828 Not Applicable Country Country Zip \$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) CORNETT, JANE **401 E OSCEOLA STREET** STUART FL 34994 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Department of State FEE IS \$61.25 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. CR2E037 (10/00) Change ☐ Addition TITLE ☐ Delete TITLE m NAME NAME DREW, CLIFF STREET ADDRESS STREET ADDRESS 6275 SE CHARLESTON PL B 201 CITY-ST-ZIP CITY-ST-ZIP **HOBE SOUND FL 33455** Delete Change ☐ Addition TITLE TITLE TDDESORCY, DON NAME NAME Pickner, Paul 6295 SE Charleston Pl. #A105 STREET ADDRESS STREET ADDRESS 6235 SE CHARLESTON PL G202 CITY-ST-ZIP CITY-ST-ZIF HOBE SOUND FL 33455 Hobe Sound, FL 33455 Change ☐ Addition TITLE SD ☐ Delete TITLE PSNAME WILEY, DOROTHEA NAME STREET ADDRESS STREET ADDRESS 6275 SE CHARLESTON PL B102 CITY-ST-ZIP CITY-ST-ZIF HOBE SOUND FL 33455 ☐ Delete ☐ Change ☐ Addition D TITLE TITLE MC DEVITT, JOSEPH NAME STREET ADDRESS STREET ADDRESS 6295 SE CHARLESTON PL A102 CITY-ST-ZIP CITY-ST-ZIF HOBE SOUND FL 33455 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME KERR, VIRGIL NAME STREET ADDRESS STREET ADDRESS 6255 SE CHARLESTON PL D106 CITY-ST-ZIP CITY-ST-ZIF HOBE SOUND FL 33455 TITLE TITLE ☐ Addition 🔀 Delete VPD NAME NAME LOCICERO, PAUL Lyons, Pat STREET ADDRESS STREET ADDRESS 6255 SE CHARLESTON PL D207 6256 SE Charleston Pl. E201 CITY-ST-ZIP CITY-ST-7IP

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.

Le Dorothea Wiley SIGNATURE://

HOBE SOUND FL 33455

Sound

Daytime Phone #

FILED