## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N01000003878

City-St-Zip:

ORLANDO, FL 32804

Entity Name: SPRING LAKE POINTE COMMUNITY ASSOCIATION, INC.

FILED Apr 29, 2002 8:00 AM Secretary of State

| Current P   | rincipal Place   | of Business:             | New Principal Place o                       | New Principal Place of Business:             |  |
|---|--|--------------------------|---|--|--|
|   | IO GRAND AVI<br>D, FL 32804                              | ≣.                       |   |  |  |
| Current Mailing Address:                            |  |                          | New Mailing Address:                        |  |  |
|   | IO GRAND AVI<br>D, FL 32804                              | ≣.                       |   |  |  |
| FEI Number  | : 59-3758773   | FEI Number Applied For() | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent:       |  |                          | Name and Address of                         | Name and Address of New Registered Agent:    |  |
| 200 E. RO<br>ORLANDO<br>The above                   | BINSON ST., S<br>D, FL 32801<br>e named entity s         | US                       | purpose of changing its registered          | l office or registered agent, or both,       |  |
|   | e of Florida.<br>  |                          |   |  |  |
| SIGNATURE: Electronic Signature of Registered Agent |  |                          | ent   | <br>Date                                     |  |
| OFFICERS AND DIRECTORS:                             |  |                          |   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:         | BEURET, WILL<br>430 S. WYMOF                             |                          | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:         | DST ( )<br>BARBAREE, JO<br>2404 N. RIO GF<br>ORLANDO, FL | RANDE AVE.               | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:                         | DS ( )<br>MILLS, RUSSE<br>2404 N. RIO GF                 |                          | Title:<br>Name:<br>Address:                 | ( ) Change ( ) Addition                      |  |

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JOSHUA D. BARBAREE DST 04/29/2002