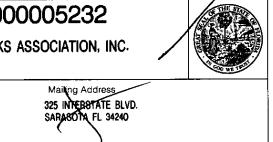
2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N0100005232 1. Entity Name VERANDA VIII AT HERITAGE OAKS ASSOCIATION, INC. Principal Place of Business Mailing Address_ 325 INNERSTATE BLVD. 325 INTERSTATE BLVD. SARASOTA FL 34240 SARASOTA TL 34240

FILED May 05, 2003 8:00 am Secretary of State

05-05-2003 91795 027 ****61.25



Professional Community Services, LLC Professional Community Services, LLC CHECK HERE IF MAKING CHANGES Interstate Park Corporate Center Interstate Park Corporate Center · 385 Interstate Blvd. Bldg. C 385 Interstate Blvd.-Bldg. C 4. FEI Number 65-1150658 Sarasota, FL 34240 Sarasota, FL 34240 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent Ron Hunter, CCM, CAM Professional Community Services, LLC SWALM & BOURGEAU, P.A.

Applied For

Not Applicable \$8.75 Additional Fee Required Name and Address of New Registered Agent 2375 TAMIAMETRAIL N., SUITE 308 Interstate Park Corporate Center 385 Interstate Blvd. Bldg. C NAPLES/FL 34103 Sarasota, FL 34240 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Make Check Pavable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 П Trust Fund Contribution. Added to Fees Florida Department of State 3 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. ÷ OFFICERS AND DIRECTORS 11. Addition TITLE ☐ Change ☐ Delete TITLE LeGlane, Susan NAME " ALLEGRA, ROBERT T NAME 5280 Hyland Hills # 1824 STREET ADDRESS 325 INTERSTATE BLVD. STREET ADDRESS Sarasota PL 34241 CITY-ST-ZIP CITY-ST-7IP SARASOTA FL 34240 ASST SECY HUNTER, ROMAND ☐ Delete TITLE TITLE DANNA, CHARLES JR NAME NAME BLOGG 385 INTERSTATE BLUD SARASOTA FL 342 STREET ADDRESS 325 INTERSTATE BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34240 ☐ Addition ☐ Delete TITI F TITLE BURNS, ALAN R NAME NAME 10481 6 MILE CYPRESS PKWY. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. MYERS FL 33912 Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 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 acquirate 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 efficiency of the exemption of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee efficiency of the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or 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 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 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 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 of the corporation or the report of the corporation 941-343-9342

SIGNATURE