2001 UNIFORM BUSINESS REPORT (UBR)

May 16, 2001 8:00 am[§] Secretary of State DOCUMENT # N10613 1. Entity Name 05-16-2001 90020 028 ****70.00 HONEY LAKE HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 1031 S.W. 135TH WAY 1031 S.W. 135TH WAY 000444 DAVIE FL 33325 DAVIE FL 33325 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number City & State Applied For 65-0116328 Not Applicable Zip Country Zip Country \$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) DUBE, SAM 1031 S.W. 135TH WAY DAVIE FL 33325 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) Make Check Payable to 9. Election Campaign Financing **FILE NOW:** \$5.00 May Be Trust Fund Contribution. **Department of State** Added to Fees FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Change ☐ Addition TITLE ☐ Delete TITI F NAME NAME DUBE, SAM STREET ADDRESS STREET ADDRESS 1031 S.W. 135TH WAY CITY-ST-ZIP CITY-ST-ZIP DAVIE FL 33325 Change Addition TITLE TITLE ☐ Delete NAME NAME MYNAH, GENE STREET ADDRESS STREET ADDRESS 13521 S.W. 9TH CT CITY-ST-ZIP CITY-ST-ZIP DAVIE FL 33325 ☐ Change Addition TITLE TITLE Delete NAME NAME CRAIG, HEATHER STREET ADDRESS STREET ADDRESS 950 S.W. 135TH WAY CITY-ST-ZIP CITY-ST-ZIP DAVIE FL 33325 ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME Dube, Lori NAME STREET ADDRESS STREET ADDRESS 1031 S.W. 135TH WAY CITY-ST-ZIF CITY-ST-ZIP DAVIE FL 33325 TITLE ☐ Delete TITLE ☐ Change Addition NAME SIMON, JOHN NAME STREET ADDRESS 13521 S.W. 10TH PLACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DAVIE FL 33325 TITLE D ☐ Delete TITLE Change Addition NAME REDSTOCK, JIM NAME STREET ADDRESS STREET ADDRESS 13570 S.W. 10TH PLACE CITY-ST-7IP CITY-ST-ZIP

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.

SIGNATURE:

DAVIE FL 33325

FILED