2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 27, 2001 8:00 am³ Secretary of State **DOCUMENT # N19798** 1. Entity Name ISLAND REEF ASSOCIATION, INC. 03-27-2001 90009 005 ****61.25 Principal Place of Business Mailing Address P.O. BOX 6017 1661 ESTERO BLVD. FT. MYERS BEACH FL 33932 SUITE 27A FT. MYERS BEACH FL 33932 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1420198 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) SUITOR, DOUGLAS G., JR. 1661 ESTERO BLVD 27 FT. MYERS BCH FL 33932 Zip Code FL 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Sacking Enrol TITLE PD ☐ Addition TITLE SD ☐ Delete PHIFER, SHIRLEY NAME NAME 46 Pond Drive STREET ADDRESS STREET ADDRESS 7000 ESTERO BLVD APT 200 Khinebeck, 414 CITY-ST-ZIP CITY-ST-7IP FT. MYERS BCH FL Delete ☐ Change ☐ Addition TITLE TD TITLE NAME **GUTZLER, PAUL** Or Ervin Heiser 2000 Estao BIVO. NAME STREET ADDRESS STREET ADDRESS 7000 ESTERO BLVD APT 604 CITY-ST-ZIP CITY-ST-ZIP FT. MYERS BEACH FL TITLE TITLE ☐ Delete MCENROE, JACK NAME NAME STREET ADDRESS STREET ADDRESS RD #2 BOX 112 CITY-ST-ZIP CITY-ST-ZIP **RED HOOK NY** ☐ Addition Delete TITLE HEISER, ERVIN W. NAME NAME STREET ADDRESS STREET ADDRESS 7000 ESTERO BLVD 205 CITY-ST-ZIP CITY-ST-ZIP FT. MYERS BEACH FL Change ☐ Addition TITLE TITLE WHITTEMORE, ROBERT NAME NAME STREET ADDRESS STREET ADDRESS 7000 ESTERO BLVD. 600 CITY-ST-ZIP CITY-ST-ZIP FT MYERS BCH FL ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAMÉ NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

SIGNATURE:

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 changed, or on an attachment with an address with all other like empowered.