

FILED
Jun 27, 2001 8:00 am
Secretary of State

06-01-2001 90001 020 ****61.25

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N42522

1. Entity Name
CRYSTAL RIVER EAGLE'S AERIE 4272, INC.

Principal Place of Business
6875 W. GULF TO LAKE HWY.
CRYSTAL RIVER FL 34428

Mailing Address
6875 W. GULF TO LAKE HWY.
CRYSTAL RIVER FL 34428

CA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-3194858

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SCHREIBER, DELLA
2356 S. SEILER PT.
LECANTO FL 34429

Name: KENNETH R. HARRINGTON
Street Address (P.O. Box Number is Not Acceptable): 1762 N. DUNKEN FIELD AVE
City: CRYSTAL RIVER FL Zip Code: 34429

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: Kenneth R. Harrington Secretary 5/25/01
Signature, typed or printed name of registered agent and title if applicable. (NOT Registered Agent signature required when reinstating) DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: P
NAME: CALEY, JESSE
STREET ADDRESS: P.O. BOX 2774
CITY-ST-ZIP: CRYSTAL RIVER FL 34423

TITLE: PRESIDENT
NAME: KENNETH PARSONS
STREET ADDRESS: 7165 W. COTTAGE LAKE
CITY-ST-ZIP: CRYSTAL RIVER FL 34429

TITLE: T
NAME: STENGEL, DAVID
STREET ADDRESS: 3515 S. ARUNDEL TERR.
CITY-ST-ZIP: HOMOSASSA FL 34446

TITLE: VICE PRESIDENT
NAME: VIGOR FAULKENBURY
STREET ADDRESS: P.O. BOX 2916
CITY-ST-ZIP: CRYSTAL RIVER FL 34423

TITLE: S
NAME: SCHREIBER, DELLA
STREET ADDRESS: 2356 S. SEILER PT
CITY-ST-ZIP: LECANTO FL 34461

TITLE: SECRETARY
NAME: KENNETH HARRINGTON
STREET ADDRESS: 1762 N. DUNKEN FIELD AVE
CITY-ST-ZIP: CRYSTAL RIVER FL 34429

TITLE: TD
NAME: WEISS, GORDAN
STREET ADDRESS: 5237 S LOUISE PT
CITY-ST-ZIP: HOMOSASSA FL 34446

TITLE: TRUSTEE
NAME: JOHN NORUP
STREET ADDRESS: 3091 N. OAKLAND TERR.
CITY-ST-ZIP: CRYSTAL RIVER FL 34428

TITLE: T
NAME: OSBORNE, MARTY
STREET ADDRESS: 2266 S. SEILER PT.
CITY-ST-ZIP: LECANTO FL 34461

TITLE: TRUSTEE
NAME: GLEN ANDERSON
STREET ADDRESS: 2123 N. SUNSHINE PATH
CITY-ST-ZIP: CRYSTAL RIVER 34429

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE:
NAME:
STREET ADDRESS:
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: Kenneth R. Harrington 5/25/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER - OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)