2000 UNIFORM BUSINESS REPORT (UBR)

Jan 22, 2000 8:00 am Secretary of State DOCUMENT # N9500004085 1. Entity Name 01-22-2000 90068 044 ****61.25 NATURE COAST R/CERS, INC. Principal Place of Business Mailing Address FLORIDA BARGE CANALLOCKS 4107 E WITHLACOOCHEE TRL **DUNNELLON FL 34434-4757** 904157 INGLIS FL 34431 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For NOT APPLICABLE Not Applicable Zip Zip Country 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 Street Address (P.O. Box Number is Not Acceptable) BROWN, KENNETH M 4107 E WITHLACOOCHEE TR **DUNNELLON FL 34434** 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. CONTRACTOR AND THE COST 175.VC 123 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: Make Check Payable to \$5.00 May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE ☐ Delete TITLE ☐ Change **X** Addition THIBADO DANIEL 7655 W. DROVER ST NAMÉ WEAVER, RICHARD NAME STREET ADDRESS STREET ADDRESS 9224 W HARBOR ISLE CT CITY-ST-ZIP CITY-ST-ZIP Crystal river fl 34428 HOMOSASSA, FL 34446 **⊠** Delete TITLE TITLE ☐ Change Addition KOHLHEPP, WARREN 8470 N. ELKCAM NAME BACKHAUS, FRED NAME STREET ADDRESS STREET ADDRESS 4458 N-BAYWOOD DR CITY-ST-ZIP CITY-ST-ZIP BEVERLY HILLS FL 34465 CITRUS SPRINGS, FL 34433 ☐ Delete ☐ Change TITLE TITLE Addition MARTIN BRETT 1179 W. BRIDGE DR NAME MORRO, JOHN NAME STREET ADDRESS STREET ADDRESS 20800 RIVER DRIVE A-35 CITY-ST-ZIP CITY-ST-ZIP **DUNNELLON FL 34431** CITRUS SPRINGS FL TITLE ■ Delete TITLE ☐ Addition NAME van dorn, dennis NAME STREET ADDRESS 148 NEELD ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP INGLIS FL 34449 TITLE ☐ Delete TITLE ☐ Change ☐ Addition BROWN, KEN NAME NAME STREET ADDRESS STREET ADDRESS 4107 WITHLACOOCHEE TR CITY-ST-ZIP CITY-ST-ZIP **DUNNELLON FL 34434** TITLE **Delete** TITLE ☐ Change Addition NAME LINNE, TED NAME 5931 N BROOKGREEN DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CRYSTAL RIVER FL 34428

FILED

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 EKENNETH M. BROWN JAN 12,00 SIGNATURE:

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