2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 16, 2001 8:00 am Secretary of State DOCUMENT # N9600003302 1. Entity Name HIDDEN LAKES MEN'S GOLF ASSOCIATION, INC. 01-16-2001 90066 040 ****61.25 Principal Place of Business Mailing Address 35 FAIRGREEN AVENUE 35 FAIRGREEN AVENUE NEW SMYRNA BEACH FL 32168 NEW SMYRNA BEACH FL 32168 U0003612 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 59-3422274 Not Applicable \$8.75 Additional Zip Country Country Zip 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) PETERSON, SID C JR. **418 CANAL STREET NEW SMYRNA BEACH FL 32168** Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be П Trust Fund Contribution. Added to Fees Department of State > **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Change PRESIDEN T ☐ Addition TITI F TITLE **Delete** WALSH, JAMES NAME CAPE, DAVID NAME 4 ANDREA DRIVE NEW SMYRNA BEACH - FL 32 168 STREET ADDRESS 102 GOLF CLUB DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **NEW SMYRNA BEACH FL 32168** VICE PRESIDENT TITLE **E** Delete TITLE NAME CAPE, DAVID NAME WILLIAM STEWART IS LAKE FAIRGREEN CIRCLE STREET ADDRESS STREET ADDRESS 9 ANDREA DRIVE CITY-ST-ZIP CITY-ST-ZIP NEW SMYRNA BEACH FL 32168 NEW SMYRWA BEACH-FL 3216 □ Delete DIRECTOR BURGESS WILLIAM 322 CANAL ROAD EDGEWATER - FL 32132 MILLER, RUSSELL NAME NAME STREET ADDRESS STREET ADDRESS 7 ANDREA DRIVE CITY-ST-ZIP CITY-ST-7IP **NEW SMYRNA BEACH FL 32168** DIRECTOR TITLE ☐ Delete TITLE LYNCH, JOSEPH 144 CEBAR DUNES DRIVE NEW SMYRNA BEACH- FL32/69 RIENSEMA, LUKEN NAME NAME STREET ADDRESS 201 GOLF CLUB DR STREET ADDRESS CITY-ST-ZIP **NEW SMYRNA BEACH FL 32168** CITY-ST-7IP ☐ Addition TITLE ☐ Delete TITL F ELMORE, RAY NAME NAME STREET ADDRESS 41 FORE DRIVE STREET ADDRESS City-St-Zip **NEW SMYRNA BEACH FL 32168** CITY-ST-ZIP מ TITLE ☐ Delete TITLE ☐ Change Addition WHITMAN, JOHN NAME NAME STREET ADDRESS 715 FAIRWAY DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **NEW SMYRNA BEACH FL**

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 supplier entail 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 of the corporation or the receiver of the corporation of th changed, or on an attachment

SIGNATURE:

JRE RUENSEMA LONEN