## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jack B. Owen,

## May 04, 2001 8:00 am Secretary of State DOCUMENT # P95000097805 HARMONY OF HOBE SOUND, INC. 05-04-2001 90093 028 \*\*\*150.00 Principal Place of Business Mailing Address 4500 PGA BLVD. 4500 PGA BLVD. STE 303A STE 303A PALM BEACH GARDENS FL 33418 PALM BEACH GARDENS FL 33418 2. Principal Place of Business 3. Mailing Address 4500 PGA Blvd. 4500 PGA Blvd. Suite Apt #, etc. Suite 207 Suite, Apt. #, etc. Suite 207 DO NOT WRITE IN THIS SPACE City & State Palm Beach Gardens, FL Applied For City & State 4. FEI Number 65-0634088 Palm Beach Gardens, FL Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 33418 Fee Required 33418 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DiVosta, Otto B. DIVOSTA, OTTO B Street Address (P.O. Box Number is Not Acceptable) 4500 PGA BLVD. 4500 PGA B1vd., Suite 207 **STE 303A** PALM BEACH GARDENS FL 33418 City Zip Code Palm Beach Gardens, 33418 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. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change DP TITLE ☐ Delete TITLE Addition DΡ NAME DIVOSTA, OTTO B NAME DiVosta, Otto B. 4500 PGÁ Blvd., Suite 207 STREET ADDRESS STREET ADDRESS 4500 PGA BLVD.-STE 303A Palm Beach Gardens, FL 33418 CITY-ST-ZIP CITY-ST-ZIP PALM BEACH GARDENS FL 33418 Addition TITLE ☐ Delete Change JACK B. OWEN, JR. NAME NAME Jack B. Owen, Jr. 4500 PGA Blvd., Suite 207 STREET ADDRESS STREET ADDRESS 4500 PGA BLVD. -STE 303 Palm Beach Gardens, FL 33418 CITY-ST-ZIP CITY-ST-7IP PALM BEACH GARDENS FL TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.