FILED

## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## Jul 29, 2003 8:00 am **Secretary of State** DOCUMENT # **736826** 02-12-2003 90078 046 \*\*\*\*61.25 KANAPAHA MAINTENANCE, INC. Principal Place of Business Mailing Address 5745 SW 75TH ST 5745 SW 75TH ST 55052668 PMB 126 PMB 126 GAINESVILLE FL 32608 GAINESVILLE FL 32608 2. Principal Place of Business 3. Mailing Address - -Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number 59-1729409 City & State City & State Applied For Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WOLF, ISABEL D Street Address (P.O. Box Number is Not Acceptable) 5745 SW 75TH ST SUITE 126 **GAINESVILLE FL 32608** 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be After September 10, 2003, min will be \$236.25 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. DŦ ☐ Addition TITLE ☐ Delete TITLE Change HECKER, EMIL NAME NAME 10118 S.W. 67TH DRIVE STREET ADDRESS STREET ADDRESS NO CHANGE CITY-ST-ZIP ÇITY-ST-ZIP GAINESVILLE FL 32608 TITLE Delete TITLE Change Addition southworth, Sherrie WOLF, ISABEL NAME NAME 7108 SW 97TH LANE STREET ADDRESS STREET ADDRESS 6715 SW 100 Lang CITY-ST-ZIP\_ CITY-ST-ZIP GAINESVILLE FL 32608 <u>Gainesuille</u> 3.2<u>60</u>8 **Addition** TITLE Delete TITLE ☐ Change Duffer, Debra KRONE, CARRIE NAME NAME SW 67 Drive STREET ADDRESS 7002 SW 97TH LANE STREET ADDRESS 10122 CITY-ST-ZIP CITY-ST-ZIP GAINESVILLE FL 32608 FL Gainesuille 32608 Addition TITLE Delete TITLE ☐ Change CROSBY, ALFRED Frederick, Mary ANN NAME NAME STREET ADDRESS 6216,SW 93 AVENUE STREET ADDRESS 9703 SW CITY-ST-ZIP **GAINESVILLE FL 32608** CITY-ST-ZIP Gair esuille DVP TITLE Change ☐ Delete TITLE ■ Addition REGAN, ED NAME NAME STREET ADDRESS 10003 SW 67TH DRIVE STREET ADDRESS CITY-ST-ZIP **GAINESVILLE FL 32608** CITY-ST-ZIP 32608 BM Delete ★ Addition TITLE TITLE WILLIAMS, PAUL NAME NAME

12. Thereby 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

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

7325 SW 97TH LANE

GAINESVILLE FL 32608

STREET ADDRESS

CITY-ST-ZIP