2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

538682 DOCUMENT

1. Entity Name

LAKE SHERWOOD HILLS, INC.



Principal Place of Business Mailing Address 425 W COLONIAL DRIVE SUITE 201 425 W COLONIAL DRIVE SUITE 201 JUUUL TOU ORLANDO FL 32804 ORLANDO FL 32804 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-1766883 Not Applicable Zip Country Zip 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 Name CURTIS, PAUL L Street Address (P.O. Box Number is Not Acceptable) 425 W COLONIAL DRIVE ORLANDO FL 32804 City Zip Code 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 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 After May 1, 2003 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITI F ☐ Delete TITLE Change ☐ Addition CURTIS, PAUL L NAME 425 W COLONIAL DR STREET ADDRESS ORLANDO, FL 00000 CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition STREET ADDRESS CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP

FILED Jan 13, 2003 8:00 am Secretary of State

01-13-2003 90695 048 ***158.75

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12. I hereby certify that the information supp indicated on this report or supplemental of the corporation or the receiver of the qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and that my signature shall have the same legal effect as if made under oath; that I am an officer or director his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if accurat exe changed, or on all attachment

SIGNATURE:

407-422-4471