

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 577228

1. Corporation Name

ROBMAR DEVELOPMENT CORPORATION

| Principal Place of Business Mailing Addre | | | | | |
|------------------------------------------------------------------------------------------------------|---------------------------------------|----------------------------------|---------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|--|
| 3145 CARLOS DRIVE DUNEDIN FL 34698 | 3145 CARLOS DRIVE DUNEDIN FL 34698 | | DO NOT WRITE IN T | HIS SPACE | |
| · | | | 3. Date incorporated or Qualifed 06/28/1978 | | |
| 2. Principal Place of Business | 2a. Mailing Addre | SS | 4. FEI Number | Applied For | |
| 21 | 26 | | 16 <u>-6283827</u> | Not Applicable | |
| Suite, Apt. #, etc | Suite, Apt. #, (| etc. | 5. Certifcate of Status Desired | \$8.75 Additional Fee Required | |
| City & State | City & State | - | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | |
| Zip Country 25 | Zip | Country 30 | This corporation owes the current yea Personal Property Tax. | r Intangible | |
| 9. Name and Address of Current Registered Agent | | | 10. Name and Address of New Registered Agent | | |
| DIEM, MARY | | 81 Nam | | | |
| 3145 CARLOS DRIVE | | | | | |
| DUNEDIN FL 34698 | • | 83 | | | |
| | | 84 City | | Zip Code | |
| office or registered agent, or both, in the State agent. I am familiar with, and accept the oblines. | te of Florida. Such chang | e was authorized by the cor | ed corporation submits this statement for the purpos rporation's board of directors. I hereby accept the a | e of changing its registered opointment as registered | |
| SIGNATURE Signature, typed or printed name of registered a | gent and title if applicable | (NOTE: Registered Agent signatur | re required when reinstating) DATE | | |
| 12 OFFICERS AND DIRECTORS | | | ■ 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |

Addition STD DELETE 1.1 TITLE Change TITLE DIEM, JOHN R 1.2 NAME NAME 3145 CARLOS DRIVE 1.3 STREET ADDRESS STREET ADDRESS **DUNEDIN FL 34698** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE DIEM, MARY NAME 22 NAME 3145 CARLOS DRIVE 2.3 STREET ADDRESS STREET ADDRESS **DUNEDIN FL 34698** 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE Change ☐ Addition ∃ ITIT 6.2 NAME NAME STREET ADDRESS ASS A LIT STORY 6.3 STREET ADDRESS

CITY-ST-ZIP filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information fual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an arrow tripstee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the property of the same legal effect as if made under oath; that I am an address, with all other like empowered. 14. I hereby certify that the information supplied with indicated on this annual report or supplemental officer or director of the com-Block 12 or Block 13 if chan

6.4 CITY-ST-ZIP

SIGNATURE:

FILED

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90055 025 ***150.00

CR2E034 (11/98)

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