624940

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

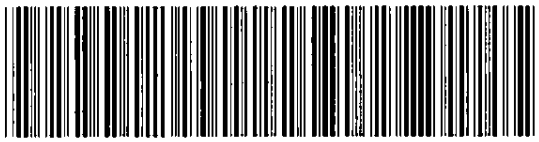
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700438440457

624940

6 № 24940

RANCHES OF RIVERNESS, INC. (THE)

Capital Stock 500 @ $1.00

Principal Office Filed 7/24/79

R07058

	4038	8/08/79		
006	5		30.00	DS
	4038	8/08/79		
006	6		15.00	DS
	4038	8/08/79		
006	7		15.00	DS
	4035	8/02/79		
006	8		3.00	DS

C. TAX 30.00
FILING 15.00
R. AGENT 3.00
C. COPY 15.00
TOTAL 63.00
N. BANK
BALANCE DUE
REFUND
PHOTO COPY

Smc 8-1-79

M

Secretary of State

STATE OF FLORIDA
THE CAPITOL
TALLAHASSEE 32304

GEORGE FIRESTONE
SECRETARY OF STATE

D. W. McKeown, Director
DIVISION OF CORPORATIONS

July 25, 1979

Mr. Glenn T. Harris
4700 N. Sheridan St.
Hollywood Fl. 33021

SUBJECT: RANCHES OF [illegible], INC. ([illegible])

DOCUMENT NUMBER. 624940

This will acknowledge receipt of the following:

1. XX Check(s) totalling $ 83.00
2. XX Articles of Incorporation filed 7/24/79
3. ____ Amendments to Articles of Incorporation filed
4. ____ Articles of Merger or Consolidation filed
5. ____ Certificate of Withdrawal filed
6. ____ Limited Partnership filed
7. ____ Limited Partnership Annual Report filed
8. ____ Trademark Application filed
9. ____ Application for qualification filed _____. It is no longer required to issue a permit. A certificate under seal to this effect may be obtained for $5.
10. ____ Reinstatement filed
11. ____ Articles of Dissolution filed
12. ____ OTHER:

ENCLOSED:

1. XX Certified Copy(ies).
2. ____ Certificate(s) Under Seal.
3. ____ Photocopy(ies).
4. ____ OTHER:

RC/[illegible]

FLORICA — STATE OF THE ARTS

CR2NP 10m
Rev. 1-79

624940

ARTICLES OF INCORPORATION

OF

THE RANCHES OF INVERNESS, INC.

THE UNDERSIGNED subscribers to these Articles of Incorporation, each a natural person, competent to contract, hereby associate themselves together to form a corporation for profit under the laws of the State of Florida; and further do agree to the following conditions of said corporation.

ARTICLE I: NAME

The name of this corporation is:

THE RANCHES OF INVERNESS, INC.

ARTICLE II: NATURE OF BUSINESS

This corporation is organized for the following purpose or purposes: to engage in any and all business ventures and transactions allowable under any and all applicable state and federal laws and all things related thereto and for the purpose of transacting any and all lawful business.

ARTICLE III: CAPITAL STOCK

This corporation is authorized to issue a maximum of 500 shares of stock. The shares of stock authorized shall be common stock having a par value of $1.00 per share. The consideration to be paid for each share of stock shall be fixed by the Board of Directors.

ARTICLE IV:

INITIAL REGISTERED AGENT AND INITIAL REGISTERED OFFICE:

The corporation's initial Registered Agent and Registered office in the State of Florida shall be: GLENN T. HARRIS, Attorney at Law, 4700P Sheridan Street, Hollywood, Florida 33021.

ARTICLE V: INITIAL BOARD OF DIRECTORS

The number of Directors shall be altered from time to time by the By-Laws adopted by the Stockholders. However, the

corporation shall have no less than one (1) Director(s) at any time. The name and post office address of each member of the first Board of Directors is:

NAME	ADDRESS
GLENN T. HARRIS	4700P Sheridan Street Hollywood, Florida 33021

The members of the first Board of Directors shall hold office until the first annual meeting of the stockholders of the corporation.

ARTICLE VI: INCORPORATOR

The name and post office address of the Incorporator executing these Articles of Incorporation is as follows:

INCORPORATOR	ADDRESS
GLENN T. HARRIS	4700P Sheridan Street Hollywood, Florida 33021

ARTICLE VII: AMENDMENTS

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

ARTICLE VIII: COMMENCEMENT DATE

Corporate existence will commence on date Articles of Incorporation are filed with the Secretary of State, State of Florida.

THE UNDERSIGNED Incorporator for the purpose of forming a corporation to do business within the State of Florida, do make and file these Articles of Incorporation, hereby declaring and certifying that the facts herein states as true.

GLENN T. HARRIS (SEAL)

STATE OF FLORIDA)
)SS
COUNTY OF BROWARD)

BE IT REMEMBERED that on this day before me, a Notary Public, duly authorized in the State and County named above to take acknowledgements, personally appeared GLENN T. HARRIS, to me known to be the person described as Incorporator in the aforegoing Articles of Incorporation, and he acknowledged before me that he executed same.

WITNESS my hand and seal at Hollywood, said County and State, this 24 day of July, 1979.

Notary Public, State of Florida at large.

My commission expires:

CERTIFICATE DESIGNATING REGISTERED AGENT

FOR SERVICE OF PROCESS

Pursuant to Chapter 48.091, Florida Statutes the undersigned hereby designates GLENN T. HARRIS, Attorney at Law, whose address is 4700P Sheridan Street, Hollywood, Florida 33021, as its Registered Agent to accept service of process with the State.

GLENN T. HARRIS

THE UNDERSIGNED HEREBY accepts the foregoing designation as Registered Agent for service of process with the State of Florida, and agrees to comply with the provisions of the law applicable to said designation.

GLENN T. HARRIS
Attorney at Law
4700P Sheridan Street
Hollywood, Florida 33021
Tele (305) 987-4430

BY
GLENN T. HARRIS

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

1980

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES
PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office

624966
RANCHES OF INVERNESS, INC. (THE)
4700 P SHERIDAN STREET
HOLLYWOOD, FLORIDA 33021

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
7/24/1979	59-1974089	

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
HARRIS, GLENN T.	D	4700 P SHERIDAN ST.	HOLLYWOOD, FL

7. Registered Agent Information

Name
HARRIS, GLENN T. (ATTORNEY AT LAW)
Street Address (Do NOT Use P.O. Box Number)
4700 P SHERIDAN STREET
City, State and Zip Code
HOLLYWOOD, FLORIDA 33021

To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of $3.

8. **See signature restrictions under instructions on reverse side of this form.**

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer	Title	Telephone Number
GLENN T. HARRIS	President	987-4430

Signature

Date 6-25-80

DO NOT WRITE IN THIS SPACE
6-30-80

(Form CORE-2U Rev. 11-78)

624940

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
Ron Levitt
Assistant Secretary of State

RECEIVED
DEPT. OF STATE
000404 OCT 15 80
REVENUE
Telephone Number:
904/488-9840

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

8368 11/12/80 624940
005 27 3.00 CS

To the Secretary of State of the State of Florida.

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

FIRST: The name of the corporation is THE RANCHES OF INVERNESS, INC.

SECOND: The address of its present registered office is

4700P Sheridan Street, Hollywood, Florida 33021

THIRD: The address to which its registered office is to be changed is

17121 S.W. 54th Street, Ft. Lauderdale, Florida 33314

FOURTH: The name of its present registered agent is Glenn T. Harris

FIFTH: The name of its successor registered agent is Jeffrey Calvert

SIXTH: The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.

SEVENTH: Such change was authorized by resolution duly adopted by its board of directors.

Dated August 26, 1980

THE RANCHES OF INVERNESS, INC.
(exact corporate name)

SIGNATURE Jeffrey David Calvert
(President or Vice-President)

DATE September 17, 1980

SIGNATURE Jeffrey David Calvert
(Registered Agent)

DATE September 17, 1980

FILING FEE: $3.00

CER. 114 Rev. 1-80

FLORIDA-State of the Arts

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
MAY 15 12 3 PM
FILED
DIVISION OF CORPORATIONS
FLORIDA

1981

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

◄ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ►

PLEASE STAPLE CHECK TO ANNUAL REPORT

1 Name and Address of Corporation Principal Office

624940
RANCHES OF INVERNESS, INC. (THE)
17121 S.W. 54TH ST.
Ft. LAUDERDALE, FL 33314

If above address is incorrect in any way, enter the correct address in Item 2 Include Zip Code

2 Enter Change of Address of Corporation Principal Office P.O. Box Number Alone is NOT Sufficient

Street Address: 8080 Pasadena Blvd.
P.O. Box No.:
City: Pembroke Pines
State: Florida
Zip Code: 33024

3 Date Incorporated or Qualified To Do Business in Florida: 7/26/1979

4 Federal Employer Identification Number (FEIN): 59-1979088

5 Date of Last Report: 1980

6 Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
~~HARRIS, GLENN T.~~	~~P/D~~	~~8700 SHERIDAN ST.~~	~~HOLLYWOOD, FL~~
Jeffrey D. Calvert	Pres.	17121 S.W. 54th St.	Ft. Lauderdale, FL. 33314
Eleanor Calvert	D.	17121 S.W. 54th St.	Ft. Lauderdale, FL. 33314
Philip F. Calvert	VP/Sec.	231 N.W. 33rd Avenue	Gainesville, FL. 32601
Thomas E. Sewell	Treas.	8080 Pasadena Blvd.	Pembroke Pines, FL. 33024

Registered Agent Information

Name: CALVERT, JEFFREY
Street Address (Do NOT Use P.O. Box Number): 17121 S.W. 54TH ST.
City, State and Zip Code: FT. LAUDERDALE, FL 33314

To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of $

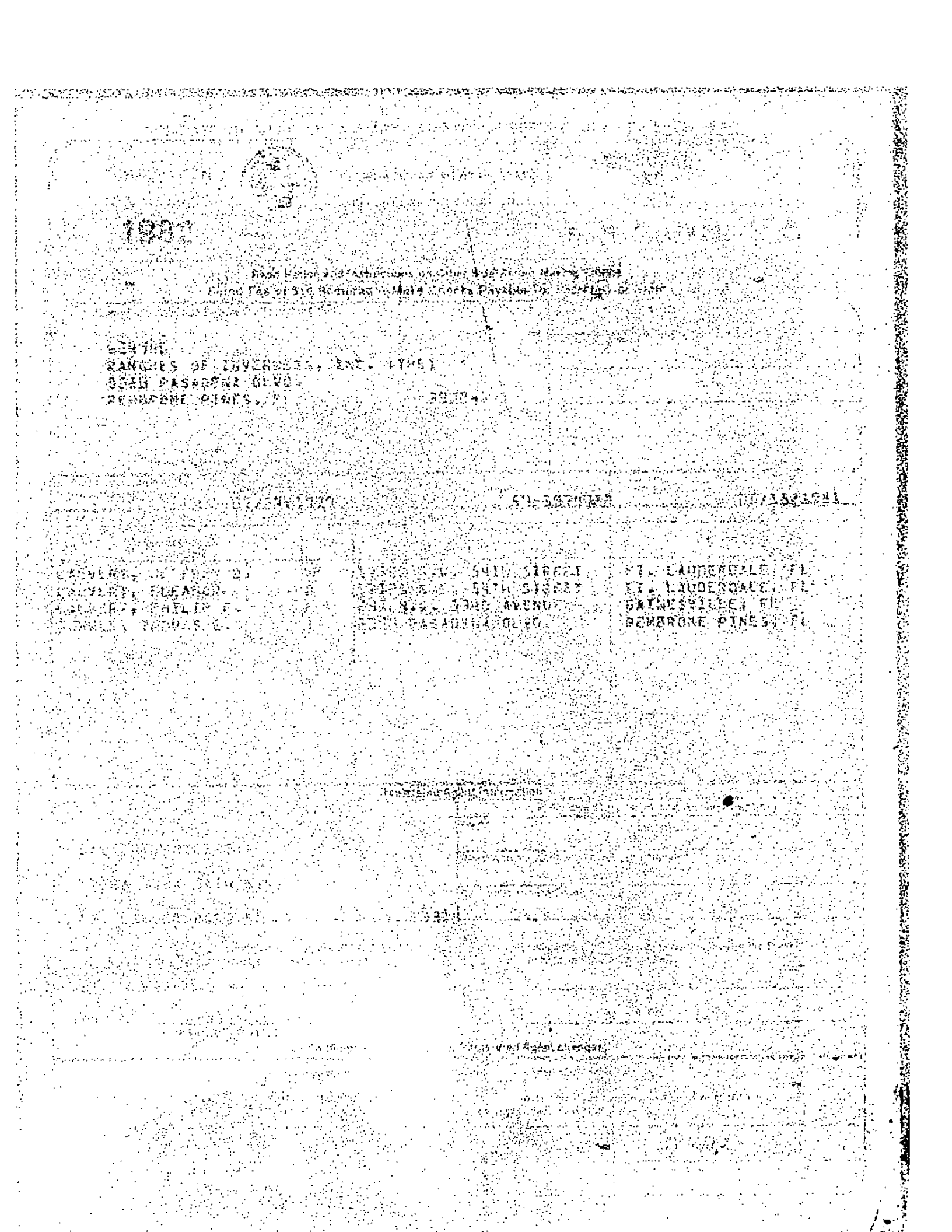
See signature restrictions under instructions on reverse side of this form

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer	Title	Telephone Number
Thomas E. Sewell	Treasurer	305-432-3100

Signature: Thomas E Sewell
Date: 1/14/81

624940 04-02-81 2 1 338 10.00



DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1983

George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

4YP

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $10 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation's Principal Office

624940
RANCHES OF INVERNESS, INC. (THE)
8080 PASADENA BLVD.
PEMBROKE PINES, FL 33024

If above address is important in any way, enter the correct address on Item 2 including Zip Code

2. Street Address (Do NOT use P.O. Box Number or RFD Number)

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 07/24/1979

4. Federal Employer Identification Number (FEIN): 59-1775088

5. Date of Last Report: 02/28/1982

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT use P.O. Box Number)	City and State
CALVERT, JEFFREY D	V	17121 S W 54TH STREET	FT LAUDERDALE, FL
CALVERT , PHILIP F	P/S	231 N W 33RD AVENUE	GAINESVILLE, FL
CALVERT, ELEANORE	D	17121 S W 54TH STREET	FT LAUDERDALE, FL
SEWELL, THOMAS E	T	8080 PASADENA BLVD	PEMBROKE PINES, FL

Registered Agent Information

7. Name and Address of Current Registered Agent

CALVERT, JEFFREY
17121 S.W. 54TH ST.
FT. LAUDERDALE, FL 33314

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.325, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Such change was authorized by resolution duly adopted by its board of directors on _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation (or Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607.15)
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath

Signature: Thomas E Sewell — Date: 1-5-83

Typed Name of Signing Officer: THOMAS E. SEWELL — Title: TREAS. — Telephone Number: [illegible]

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1984

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $10 Required -- Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

624940
RANCHES OF INVERNESS, INC. (THE)
8080 PASADENA BLVD.
PEMBROKE PINES, FL 33024

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 07/24/1979

4. Federal Employer Identification Number (FEIN): 59-1974084

5. Date of Last Report: 01/27/1983

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1983

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT use Post Office Box Numbers)	City and State
CALVERT, JEFFREY D	P/S/D	Rt. 5 Box 282-A	Dunnellon, Fl.
SEWELL, THOMAS E	T	8080 PASADENA BLVD	PEMBROKE PINES, FL 0000

Registered Agent Information

7. Name and Address of Current Registered Agent

CALVERT, JEFFREY
Rt. 5 Box 282-A

Dunnellon, Fl.

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on .....

SIGNATURE ..... DATE .....
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Signature	Date
Thomas E Sewell	March 21, 1984
Typed Name of Signing Officer: Thomas E. Sewell	**Title:** Treasurer
	Telephone Number: 305/432-3100

11. *Should you desire a certificate of status check the box below and include an additional $5.00 with your payment.*

CERTIFICATE OF STATUS DESIRED ☐
$5 Additional fee required for certificates

COR 620 (1-84)

CORPORATION

ANNUAL REPORT

1985

Read Notes and Instructions on Other Side Before Typing Report

Filing Fee of $20 Required — Make Checks Payable To: Secretary of State

624940 3
RANCHES OF INVERNESS, INC. (THE)
5080 PASADENA BLVD.
PEMBROKE PINES, FL 33024

2. Date Incorporated or Qualified: 07/24/1979 | 3. Federal Employer Identification Number: 59-1974058 | 4. If Applicable, Date of Last Change: 06/26/1984

5. Name and Street Address of Each Officer and Director as of December 31, 1984

	Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use P.O. Box Number)	City and State
1	CALVERT, JEFFREY O	P/S/TRT	S BOX 282-A	DUNNELLON, FL 0000
2	SEWELL, THOMAS E	T	5080 PASADENA BLVD	PEMBROKE PINES, FL 0000
3				
4				
5				
6				

Registered Agent Information

7. Name and Address of Current Registered Agent

CALVERT, JEFFREY
RT S BOX 282-A
DUNNELLON, FL

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.325, Florida Statutes, the above-named corporation (organized under the laws of the State of Florida) files this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.
Such change was authorized by resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. See instructions and check boxes on reverse side of this form.
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
Further Certify That I Understand the Signature On This Report Shall Have the Same Legal Effect as if Made Under Oath.
I Further Agree that I am Listed at Block 6.

Signature: Thomas E Sewell | Date: 6/3/85

Typed Name of Signing Officer: Thomas E Sewell | Title: Treasurer | Telephone: 432-5100

11. Request for Certificate of Status

$5 additional fee required for a Certificate of Status

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION

ANNUAL REPORT

1986

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $20 Required – Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office

624940 3
PARCHES OF INVERNESS, INC. (THE)
8060 PASADENA BLVD.
PEMBROKE PINES, FL 33024

2. Enter Change of Address of Corporation Principal Office (P.O. Box Number Alone is NOT Sufficient)

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

If above address is incorrect or any way enter the correct address in item 2. Include Zip Code.

5. Date Incorporated or Qualified to Do Business in Florida	6. Federal Employer Identification Number (FEIN)	7. Date of Last Report
07/24/1979	59-1974088	06/07/1985

8. Names and Street Addresses of Each Officer and Director, as of December 31, 1985

Names of Officers and Directors 1	Title 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4
CALVERT, JEFFREY D	P/S/T	RT 5 BOX 282-A	DUNNELLON, FL 00000
SEWELL, THOMAS E	T	8080 PASADENA BLVD	PEMBROKE PINES, FL 00000

REGISTERED AGENT INFORMATION

9. Name and Address of Current Registered Agent

CALVERT, JEFFREY
RT 5 BOX 282-A
DUNNELLON, FL

10. Name and Address of New Registered Agent

Name 81

Street Address (Do Not Use P.O. Box Number) 82

City and State 83 FL.

Zip Code 84

Pursuant to the provisions of Sections 607.024 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

The change(s) is authorized by resolution duly adopted by its Board of Directors on _____

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to comply with the provisions of Florida law relative to keeping open said office. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

See instructions under instructions on reverse side of this form.

I Hereby Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
All applicable boxes must be listed in Block 6.

Signature of Officer, Director, Receiver or Trustee

Title President

Date 5-01-86

Telephone Number 954-458-0103

☐ $5 Additional fee required for a Certificate of Status

CR3E034 (1-86)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION

ANNUAL REPORT
1987

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED
87 JUN 12 AM 10:49
FLORIDA DEPT. OF STATE
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

624940 3
RANCHES OF INVERNESS, INC. (THE)
8080 PASADENA BLVD.
PEMBROKE PINES, FL 33024

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office: P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: 07/24/1979

4. Federal Employer Identification Number (FEIN): 59-1974088

5. Date of Last Report: 05/29/1986

6. Names and Street Addresses of Each Officer and Director as of December 31, 1986

1 Names of Officers and Directors	2 Title	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State 5
CALVERT, JEFFREY D	D/V/P/S	~~RT 5 BOX 282-A~~ 17121 S.W. 54th Street	Ft. Lauderdale, FL ~~DUNNELLON FL~~ 00000
SEWELL, THOMAS E	T/D	8080 PASADENA BLVD	PEMBROKE PINES, FL 00000

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

CALVERT, JEFFREY D.
~~RT 5 BOX 282-A~~ 17121 S.W. 54th Street
~~DUNNELLON FL~~ Ft. Lauderdale, FL
33331

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: FL.

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

CR2E034 (1/86)

10. *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer signing must be listed in Block 6).

Signature: Jeffrey D. Calvert

Date: June 3, 1987

Typed Name of Signing Officer: Jeffrey D. Calvert

Title: President

Telephone Number: 305/432-3100

11. Should you desire a certificate of status check the box: CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1988

Filing Fee of $25 Required - Make Checks Payable To Secretary of State

1. Name and Address of Corporation Principal Office

624940
RANCHES OF INVERNESS, INC. (THE)
8080 PASADENA BLVD.
PEMBROKE PINES, FL 33024

If above address is incorrect in any way enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified to Do Business in Florida: 07/24/1979

4. Federal Employer Identification Number (FEIN): 59-1974088

5. Date of Last Report: 06/12/1987

Names and Street Addresses of Each Officer and Director as of December 31, 1987

Names of Officers and Directors	Title 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4 5
CALVERT, JEFFREY D	O/V/S	17121 SW 54 ST.	FT LAUDERDALE, FL.
SEWELL, THOMAS E	T/D	8080 PASADENA BLVD	PEMBROKE PINES, FL 00000

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

CALVERT, JEFFREY D.
17121 SW 54 ST.
PT LAUDERDALE, FL. 33331

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL

Zip Code 85

9. Pursuant to the provisions of Section(s) 607.034 and 607.031, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. If a foreign corporation, date first transacted business in Florida

See signature restrictions under instructions on reverse side * Also Item

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
Officer or Director signing must be listed in Block 81

Signature: [signature] Date: 6-1-88

Name and Title of Signing Officer or Director: President Telephone Number: 305 [illegible]

12. Should you desire a Certificate of Status check this box

CERTIFICATE OF STATUS DESIRED

$5 Additional Fee

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT

1989

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Current Principal Office

ZIP + 4

624940 3
RANCHES OF INVERNESS, INC. (THE)
8080 PASADENA BLVD.
PEMBROKE PINES, FL 33024-3537

If above address is incorrect in any way, enter the correct address in item 2, include Zip Code

2 Enter Change of Address or Complete Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3 Date Incorporated or Qualified to Do Business in Florida: 07/24/1979

4 Federal Employer Identification Number (FEIN): 59-1974088

5 Date of Last Report: 06/17/1988

6 Names and Street Addresses of Each Officer and Director, as of December 31, 1988

Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
P/D/V/S	CALVERT, JEFFREY D	17121 SW 54 ST.	FT LAUDERDALE, FL.
T/D	SEWELL, THOMAS B	8080 PASADENA BLVD	PEMBROKE PINES, FL 00000

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

CALVERT, JEFFREY D.
17121 SW 54 ST.
FT LAUDERDALE, FL. 33331

8 Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL

Zip Code 85

Pursuant to the provisions of Section 607.034 and 607.037, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, submits this report for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

The above was authorized by resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

If this is a foreign corporation, date first transacted business in Florida _____

See signature instructions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath
(Officer or Director signature must be listed in Block 6.)

Signature: Jeffrey D. Calvert Date: 2/10/89

Name (Please Type or Print): Jeffrey D. Calvert Title: President Telephone Number

CERTIFICATE OF STATUS DESIRED ☐

$5 Annual Report Processing Fee
$30 Certificate of Status

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT

1990

MAY -3 7:24

Filing Fee of $35 Required - Make Checks Payable to Secretary of State

624940 3

ZIP + 4 PRESORT

THE RANCHES OF INVERNESS, INC.
8080 PASADENA BLVD.
PEMBROKE PINES, FL 33024-3537

If above address is incorrect or any part under the correct address in Item 2. Include Zip Code

Street Address 2:

P.O. Box No. 2?

City and State 2)

Zip Code 24

Date Incorporated or Qualified in Florida: 07/24/1979

FEI Number: 59-1974068

FEI Number Applied For

SEI Number Not Applicable

Name and Street Addresses of Each Officer and Director (Do not use any blank for type or line to cover over incorrect information)

Type	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
V/P/D/S	CALVERT, JEFFREY D	17121 SW 54 ST.	FT LAUDERDALE, FL. 33331
T/D	SEWELL, THOMAS E	8080 PASADENA BLVD	PEMBROKE PINES, FL 00000

REGISTERED AGENT INFORMATION

Name and Address of Current Registered Agent

CALVERT, JEFFREY D.
17121 SW 54 ST.
FT LAUDERDALE, FL. 33331

Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL

Zip Code

Pursuant to the provisions of Sections 607.034 and 607.037 Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

The change was authorized by resolution duly adopted by its board of directors on

The above accepts the appointment of registered agent. I am familiar with and accept the obligations of Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

I hereby certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; I further certify 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, F.S.

Signature: Jeffrey D. Calvert Date: 4-28-90

Jeffrey D. Calvert | President | (305)432-3100

Type or Print Name of Individual Officer or Director | Title | Daytime Telephone Number

Annual Report Fee

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1991

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
FL DEPT. OF
CORPORATION
TALLAHASSEE, FL
FILED

DO NOT WRITE IN THIS SPACE

FILING FEE OF $61.25 REQUIRED

1. Name and Mailing Address of Corporation

DOCUMENT #624940 (3)

ZIP + 4 PRESORT

PASSWORD

THE RANCHES OF INVERNESS, INC.
8080 PASADENA BLVD.
PEMBROKE PINES, FL 33024-3537

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address

22 P.O. Box No.

23 City and State

24 Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 07/24/1979

4. FEI Number: 59-1974088

FEI Number Applied For

FEI Number Not Applicable

5. $8.75 CERTIFICATE OF STATUS DESIRED

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

	Type 1	Names of Officers and Directors 2	Street Address of Each Officer and Director 3 (Do NOT Use Post Office Box Numbers)	City and State 4
1	P/D/S	CALVERT, JEFFREY D	17121 SW 54 ST.	FT LAUDERDALE, FL.
2	T/D	SEWELL, THOMAS E	8080 PASADENA BLVD	PEMBROKE PINES, FL 00000
3				
4				
5				
6				

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

CALVERT, JEFFREY D.
17121 SW 54 ST.
FT LAUDERDALE, FL. 33331

8. Name and Address of New Registered Agent

81 Name

82 Street Address 1 (Do NOT Use P.O. Box Number)

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City FL. 85 Zip Code

9. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors.

I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; I further certify 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 1 or 2 on an attachment with an address.

SIGNATURE Jeffrey Calvert DATE 2-1-91

JEFFREY DAVID CALVERT PRESIDENT

Telephone Number Daytime: (305) 432-3100

CR2E034 (1-91)

FILING FEE OF $61.25 REQUIRED — Make Checks Payable To: Secretary of State $8.75 Additional Fee required for a Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1992

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FILED

FILING FEE $61.25 Make Payable To Secretary of State

DOCUMENT #624080 (3)

1. Name and Mailing Address of Corporation

THE RANCHES OF INVERNESS, INC.
8080 PASADENA BLVD.
PEMBROKE PINES FL 33024-3537

2. Address to which correspondence concerning this report should be sent

21 Mailing Address

22 P.O. Box No.

23 City and State

24

3. Date Authorized to Do Business in Florida 07/24/1979

3a. Date of Last Report 02/12/1991

4. FEI Number 59-1974088

FEI Number Applied For

5.

FEI Number Not Applicable

CERTIFICATE OF STATUS

6. Name and Street Address of Each Officer and Director (Do not use box numbers or type in more than one address per line.)

1	2 Name of Officer and Director	3 Street Address of each Officer and Director (Do NOT Use Post Office Box Numbers)	4
1 P/D/S	CALVERT, JEFFREY D	17121 SW 54 ST.	FT LAUDERDALE, FL.
2 T/D	SEWELL, THOMAS E	8080 PASADENA BLVD	PEMBROKE PINES, FL 00000
3 V.P.	CALVERT JASON	17121 S.W. 54 ST	FT LAUD. FL 33331
4			
5			
6			

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

CALVERT, JEFFREY D.
17121 SW 54 ST.
FT LAUDERDALE, FL. 33331

8. Name and Address of New Registered Agent

81 Name

82 Street Address (Do NOT Use P.O. Box Number)

83 Street Address, P.O. Box or P.O. Box Number

84 City FL. 85

9. Pursuant to the provisions of Section 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits the statement of change of registered office or registered agent, or both, in the State of Florida. Such change was duly authorized by the corporation. I hereby certify that the appointment of registered agent, as stated above, is true and accurate and I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. This corporation has activity for intrastate tax under S. 199.032 Florida Statutes Yes X No (See other side for information on filing requirements)

11. I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature on this report constitutes my certification as 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 6 or 8 above with an address.

SIGNATURE Jeffrey D Calvert 2-18-92

JEFFREY D. CALVERT | PRESIDENT | 305 434-1394

12

File Now. Filing Fee after May 1 is $225 00

DOCUMENT # 624940 (3)

~~THE RANCHES OF INVERNESS, INC.~~
~~8080 PASADENA BLVD~~
~~PEMBROKE PINES FL 33024-3537~~

07/24/1979

591974088

02/26/1992

$8.75 Additional Fee Required

$5.00

10. Name and Address of New Registered Agent

CALVERT, JEFFREY D.
17121 SW 54 ST.
FT LAUDERDALE FL 33331

FL

P/D/S
CALVERT, JEFFREY D
17121 SW 54 ST.
FT LAUDERDALE FL

~~P/D~~
~~SCHEFF, THOMAS E~~
~~8080 PASADENA BLVD~~
~~PEMBROKE PINES, FL 00000~~

V
CALVERT, JASON
17121 SW 54 ST
FT LAUDERDALE FL

TALL75002

JEFFREY D CALVERT
17121 SW 54 ST
FT LAUD FLA 33331

FILE NOW: FL300 FEE AFTER MAY 1 IS $225.00

1994

DOCUMENT #

624940 (S)

94 APR 12 AM 9:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THE RANCHES OF RIVERNESS, INC.

17121 SW 54 STR
FT LAUDERDALE FL 33331
US

17121 SW 54 STR
FT LAUDERDALE FL 33331
US

1 07/29/1979 2 05/10/1993

3 59-1974086

4 [redacted]

5 $5.00

6 ✓

9 Name and Address of Current Registered Agent

CALVERT, JEFFREY D.
17121 SW 54 ST.
FT LAUDERDALE FL 33331

10 Name and Address of New Registered Agent

FL

12

P/D/S
CALVERT, JEFFREY D
17121 SW 54 ST
FT LAUDERDALE FL
T
CALVERT JEFFREY D
17121 SW 54 STR
FT LAUDERDALE FL
V
CALVERT, JASON
17121 SW 54 ST
FT LAUDERDALE FL

13

14

SIGNATURE: Jeffrey D Calvert JEFFREY D. CALVERT 4-6-93

305 434-1394

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY 11 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 623309 (2)

1. Corporation Name
CASTNER AND CASTNER, INC.

Principal Place of Business
5210 CORTEZ ROAD, WEST
BRADENTON FL 34210-2911

Mailing Address
5210 CORTEZ ROAD, WEST
BRADENTON FL 34210-2911

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/30/1979
3a. Date of Last Report: 02/06/1994

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 59-1919819
Added Fee
Late Application

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CASTNER, BRADFORD J
5210 CORTEZ ROAD, WEST
BRADENTON FL 34209

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office, registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (#'s 1-12)		
TITLE	V	1.1 TITLE		☐ Change ☐ Addition
NAME	CASTNER, BRADFORD J	1.2 NAME		
STREET ADDRESS	3615 27 AVE W	1.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 0	1.4 CITY-ST-ZIP		
TITLE	ST	2.1 TITLE		☐ Change ☐ Addition
NAME	CASTNER, JANET E	2.2 NAME		
STREET ADDRESS	6307 2ND AVE N W	2.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 0	2.4 CITY-ST-ZIP		
TITLE	P	3.1 TITLE		☐ Change ☐ Addition
NAME	CASTNER, WILBUR J	3.2 NAME		
STREET ADDRESS	6307 2ND AVE N W	3.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 0	3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; 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 12 or 13 above, or on an attachment with an address.

SIGNATURE: Wilbur J Castner Jr. 5/6/95 813 7551297
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY 11 AM 11:05
SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # **624940** **(3)**

Corporate Name
THE RANCHES OF INVERNESS, INC.

Principal Place of Business	Mailing Address
17121 SW 54 STR FT LAUDERDALE FL 33331 US	17121 SW 54 STR FT LAUDERDALE FL 33331 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/24/1979
3a. Date of Last Report: 04/12/1994
4. FEI Number: 59-1974080
5. Certificate of Status Desired — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution — $5.00 May Be Added to Fees
8. This corporation has inserts for exemption

2. Principal Place of Business / 2a. Mailing Address (changes): blank

3. Name and Address of Current Registered Agent

CALVERT, JEFFREY D.
17121 SW 54 ST.
FT LAUDERDALE FL 33331

10. Name and Address of New Registered Agent

Name:
Street Address (P.O. Box Number is Not Acceptable):
City: FL Zip Code:

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and agree to accept the obligations of Section 607.0505, Florida Statutes.

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
PDS CALVERT, JEFFREY D 17121 SW 54 ST. FT LAUDERDALE FL	
T CALVERT, JEFFREY D 17121 SW 54 STR FT LAUDERDALE FL	
V CALVERT, JASON 17121 SW 54 ST FT LAUDERDALE FL	
DIRECTOR DAVID CALVERT 32630 18975 W. Hwy 328 DUNNELLON, FL	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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.

SIGNATURE: Jeffrey Calvert JEFFREY D. CALVERT 5-9-95 305 434-1394
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR