## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR

## May 24, 2001 8:00 am Secretary of State **DOCUMENT # 635732** 05-24-2001 90006 013 \*\*\*150.00 TWIN HARBORS, INC. Principal Place of Business Mailing Address C/O KB HOLDINGS C/O KB HOLDINGS C0068988 647 E DANIA BEACH BLVD 647 E DANIA BEACH BLVD DANIA BEACH FL 33004 DANIA BEACH FL 33004 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE % Atlantia Holdings % Atlantia Holdings 910 S.E. 17<sup>th</sup> St., Suite 300 910 S.E. 17th St., Suite 300 Applied For 4. FEI Number Ft. Lauderdale, FL 33316 59-1938411 Ft. Lauderdale, FL 33316 Not Applicable \$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 WAGNER, J C/O KB HOLDINGS Wagner, J. 647 E DANIA BEACH BLVD % Atlantia Holdings 910 SE 17th St., # 300 DANIA BEACH FL 33004 Zip Code Ft. Lauderdale, FL 33316 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 % [ c 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PD TITLE Bailey, William A. NAME NAME **BOULIS. GUS** % Atlantia Holdings STREET ADDRESS STREET ADDRESS C/O KB HOLDINGS 647 E DANIA BEACH BLVD 910 SE 17th St., # 300 CITY-ST-ZIP CITY-ST-ZIP DANIA BEACH FL 33004 Ft. Lauderdale, FL 33316 $\square$ Delete TITLE NAME NAME Farrell, James B. STREET ADDRESS STREET ADDRESS % Atlantia Holdings CITY-ST-ZIP CITY-ST-ZIP 910 SE 17th St., #300 TITLE ☐ Delete TITLE Addition Ft. Lauderdale, FL 33316 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE ☐ Addition Change 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 TITLE ☐ Delete TITLE ☐ Addition Change NAME STREET ADDRESS STREET ADDRESS 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.

4/30/01

FILED