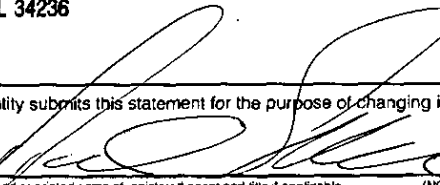
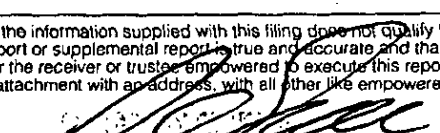


5/15

FILED
Jun 21, 2000 8:00 am
Secretary of State

05-15-2000 90261 029 ***150.00

DOCUMENT # 670764		FILED	
1. Entity Name FOUR WINDS ASSOCIATES, INC.		Jun 21, 2000 8:00 a Secretary of State 05-15-2000 90261 029 ***150.00	
Principal Place of Business 1601 KEN THOMPSON PKWY C/O EUGENE M. WHIPP SARASOTA FL 34236		Mailing Address 2005 N TAMiami TR C/O EUGENE M. WHIPP SARASOTA FL 34234-8342 US	
2. Principal Place of Business 1601 KEN THOMPSON PKWY		3. Mailing Address 1601 KEN THOMPSON PKWY	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State SARASOTA FL		City & State SARASOTA FL	
Zip 34236-1005		Zip 34236-1005	
Country US		Country US	
4. FEI Number 59-1998557		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROBERTSON, WILLIAM E. J 720 S. ORANGE AVENUE SARASOTA FL 34236		7. Name and Address of New Registered Agent Name SMITH, PETER Street Address (P.O. Box Number is Not Acceptable) 1601 KEN THOMPSON PKWY City SARASOTA FL Zip Code 34236-1005	
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  (NOTE: Registered Agent signature required when reinstating) DATE 6/7/00			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐		10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State			
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PD NAME WHIPP, EUGENE M STREET ADDRESS 1601 KEN THOMPSON PKWY CITY-ST-ZIP SARASOTA FL 34236 ☒ Delete		TITLE P/S/T NAME GUTSHALL, LAU F STREET ADDRESS 1601 KEN THOMPSON PKWY- CITY-ST-ZIP SARASOTA FL 34236-1005 ☐ Change ☒ Addition	
TITLE STD NAME WHIPP, NORMA C STREET ADDRESS 1601 KEN THOMPSON PKWY CITY-ST-ZIP SARASOTA FL 34236 ☐ Delete		TITLE V NAME SMITH, PETER STREET ADDRESS 1601 KEN THOMPSON PKWY CITY-ST-ZIP SARASOTA FL 34236-1005 ☐ Change ☒ Addition	
TITLE AT (Assistant Treasurer) NAME SAVAGE, MARCIA STREET ADDRESS 1601 KEN THOMPSON PKWY CITY-ST-ZIP SARASOTA FL 34236-1005 ☐ Change ☒ Addition		TITLE V NAME SAVAGE, MARCIA STREET ADDRESS 1601 KEN THOMPSON PKWY CITY-ST-ZIP SARASOTA FL 34236-1005 ☐ Change ☒ Addition	
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.			
SIGNATURE: 		Date 4/27/00 Daytime Phone # 941 388 4411	