2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 12, 2000 8:00 am Secretary of State **DOCUMENT # 718783** 1. Entity Name THE BILLOWS ASSOCIATION, INC. 04-12-2000 90180 016 ****61.25 Principal Place of Business Mailing Address % ROBERT WHITEHEAD % ROBERT WHITEHEAD 1105 12TH ST 1105 12TH ST VERO BEACH FL 32960 VERO BEACH FL 32960-3718 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #; etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1300505 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 Street Address (P.O. Box Number is Not Acceptable) WHITEHEAD, ROBERT 1105 12TH STREET VERO BEACH FL 32960 City Zip Code FL 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. ACTO LEWY TO LOW THESE COST & THE SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. П Added to Fees **Department of State FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Addition TITLE PD Delete TITLE ☐ Change NAME GASSER, ROBERT STREET ADDRESS STREET ADDRESS 1180 REEF RD., UNIT B-4 CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32963 Delete TITLE ☐ Change Addition TITLE GILL, ROBERT NAME NAME STREET ADDRESS STREET ADDRESS 1180 REEF RD., A-23 CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32963 ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME KEEGAN, PATRICK NAME STREET ADDRESS STREET ADDRESS 1180 REEF RD B4 CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL ☐ Change Addition TITLE ☐ Delete TD TITLE NAME MURPHY, JOHN NAME STREET ADDRESS STREET ADDRESS 1180 REEF ROAD CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 23963 Addition TITLE Delete TITLE ☐ Change ROELLER, GWENDOLYN NAME NAME STREET ADDRESS STREET ADDRESS 1180 REEF RD A-17 CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32963 ☐ Delete ☐ Change Addition TITLE TITLE NAME **GRIMES, NANCY**

12. 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 trusts empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

1180REEF RD B-1

VERO BEACH FL 32963

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #