2008 NOT-FOR-PROFIT CORPORATION

Apr 28, 2008 8:00 am Secretary of State

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DOCUMENT #722716 04-28-2008 90383 012 ****70.00 WILBUR IMPROVEMENT ASSOCIATION, INC. Principal Place of Business Mailing Address **4200 S PENINSULA DRIVE** 4200 S. PENNINSULA DR. WILBUR-BY-THE-SEA, FL 32127 WILBUR-BY-THE-SEA, FL 32127 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04242008 Chq-NP CR2E037 (12/06) 4. FEI Number 59-2388702 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ---Name MILLS, ROBERT 4026 CARDINAL BLVD Street Address (P.O. Box Number is Not Acceptable) WILBUR-BY-THE-SEA, FL 32127 Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2008 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Delete Delete TITLE ☐ Change BURNS, SUR TIC AVE. MARFOGLIA, ARNOLD NAME NAME 4050 S PENINSULA DRIVE STREET ADDRESS STREET ADDRESS WILBUR - by - The - SEA, FL CITY-ST-ZIP WILBUR-BY-TH-SEA, FL 32127 CITY-ST-ZIP VPD TITLE ☐ Delete TITLE EDDINGTON, MELANIE MAME MANE STREET ADDRESS 4248 S. ALTLANTIC AVE. STREET ADDRESS CITY-ST-ZIP WILBUR-BY-THE-SEA, FL 32127 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition HARAPAS, CAROCINE 4112 ORIOLE AVE. BELCHER, JOYCE NAME NAME STREET ADDRESS 3923 CARDINAL BLVD. STREET ADDRESS WILBUR-by-the-SEA, FC 3 2 127 CITY-ST-ZIP WILBUR-BY-THE-SEA, FL 32127 CITY-ST-ZIP TITLE TD ☐ Delete ☐ Change Addition TITLE MILLS, ROBERT NAME MAME STREET ADDRESS 4026 CARDINAL BLVD STREET ADDRESS CITY-ST-ZIP WILBUR-BY-THE-SEA, FL 32127 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete mr ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attacturent with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR