| City & State City & State 7. Is this nonprofit corporation a homeownere association? 21p 22p 23p Country 8. This corporation owes or has paid the current year intangible personal Property Tax due June 30. Ves No 21p 22p 23p 23p 20p Country 8. This corporation owes or has paid the current year intangible personal Property Tax due June 30. Ves No 22p 23p 30p Country 8. This corporation owes or has paid the current year intangible personal Property Tax due June 30. Ves No 23p 23p 30p Personal Property Tax due June 30. Ves No 24p 25p 20p Country 8. This corporation owes or has paid the current year intangible personal Property Tax due June 30. Ves No 250p NW S9TH STREET 11 Name 12 Name 12 Name 12 Point Name and Address of Nov Acceptable) 250x NW S9TH STREET 250p NW S9TH STREET 182 Street Address for Orporation submits this statement for the purpose of changing its registered agent inductor and inductor agent agent agent. Not Acceptable) 250AV W <th></th> <th>ONPROFIT RPORATION UAL REPORT 1998</th> <th></th> <th>Sandra B Secretar</th> <th>RTMENT OF STATE . Mortham ry of State CORPORATIONS</th> <th>FILED Jan 15 1998 8:00 Secretary of Sta</th> <th></th> | | ONPROFIT RPORATION UAL REPORT 1998 | | Sandra B Secretar | RTMENT OF STATE . Mortham ry of State CORPORATIONS | FILED Jan 15 1998 8:00 Secretary of Sta | |
|---|--|---|---|--|--|---|--|
| SUNSET ISLE COMMUNITY ASSOCIATION, INC Principal Place of Business Malling Address String A Date of Susiness Malling Address String A Date of Susiness Malling Address 2 Principal Place of Business 24. Malling Address 2 Principal Place of Business 24. Malling Address 2 Principal Place of Business 24. Malling Address 2 Suite, Apt. #, etc. 27. Total State 2 Country 27. State 2 20 Country 2 20 Country 2 20 Country 3 28. Name and Address of Cuurent Registered Agent 4 10. Name and Address of Naw Registered Agent 4 City & State 10. Name and Address of Naw Registered Agent 4 City & State 10. Name and Address of Naw Registered Agent 50. Name and Address of Cuurent Registered Agent | DOCU | MENT # 72: | 3161 | (6) | | | |
| TAMARAC FL 3321 TAMARAC FL 3321 TAMARAC FL 3321 <u>U</u> /13/1972 <u>4</u> . FEI Number <u>59</u> .1443029 <u>59</u> .1443029 <u>59</u> .757 <u>59</u> .757 <u>58</u> .75 <u>58</u> .75 <u>58.75 <u>58</u>.75 <u>58.75 <u>58.75 <u>58.75 <u>58.75 <u>58.75 <u>58.75 <u>58</u>.75 <u>58.75 <u>58.75 <u>58.75 <u>58.00 <u>71 </u> <u>58</u>.75 <u>71 </u> <u>71 </u> <u>74 </u> <u>74 <u>74 </u> <u>74 </u> <u>74 </u> <u>74 </u> <u>74 </u> <u>74 </u> <u>74 </u> </u></u></u></u></u></u></u></u></u></u></u></u> | SUNS | ET ISLE COMMUNITY | <u> </u> | | | | |
| 2 Principal Place of Business 2a. Maling Address 5. Certificate of Status Desired For Bequind 21 26 Suite, Apt. #, etc. 2a Suite, Apt. #, etc. 5. Certificate of Status Desired For Bequind 22 27 City & State 27 Suite, Apt. #, etc. 5. Certificate of Status Desired For Bequind 21 City & State 27 City & State 7. Is this nonportic coporation a homeworkers association? 23 Zip Country 2ip Country 8. This conporation owes or has paid the current registered Agent 10. Name and Address of New Registered Agent No 36 9 Pareonal Property Tax due June 30. Yes No 360 NW SOTH STREET 81 Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 11 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 11 Pareonal Property Tax due June 30 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 11 Name and Address of Current Registered Agent and States. 10. Name and Address of New Registered Agent and address of Portage States St | | | | | | 04/13/1972 4. FEI Number | |
| Suite, Apt. #, etc. Added to Fees 22 City & State City & State City & State State on the nonport comportation a homeowners association? Added to Fees 23 Zip Country Zip Country B This comportation owe on the sole the current year intangible 24 Zip 25 29 29 Country 8. This comportation owe on the sole the current year intangible 2509 NW STH STREET 10. Name and Address of New Registered Agent 11 Name 340 City & State 11 Name State S | | Place of Business | | Mailing Address | | 5. Certificate of Status Desired S8.75 Ac | dditional |
| City & State City & State 7. Is this nonprofit corporation a homeowners association? 27 Country 8. This corporation owes or has paid the current year intangible 28 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MARTELLI, JEAN V. 82 Street Address of New Registered Agent 820 NW SSTH STREET 83 TAMARAC FL 33321 83 84 City 4. State 7. Pursuant to the provisions of Sections 617.0502 and 617.1503. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registere agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. Intereby accept the appointment as registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. Intereby accept the appointment as registered agent, and begintering of Section 617.0503. Forida Statutes. 11. Pursuant to the provisions of Section 617.0503. Forida Statutes, the above-named corporation submits this statement for the purpose of changing its registere agent, or board of incetors. Intereby accept the appointment are registered agent agent and a figured agent and a figured agent age | | #, etc. | | Suite, Apt. #, etc. | | 6. Election Campaign Financing \$5.00 Ma | |
| Zip Zip Country Zip Country Zip Country Rest on provide the current registered agent Rest on provide the appoint registered agent Rest on pr | | | | City & State | | | |
| Pat Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name Address of New Registered Agent MARTELLI, JEAN V. S509 NW 59TH STREET 31 Name 32 TAMARAC FL 33321 33 34 City FL 85 25 OPECERS AND DIRECTORS 10. Rame and Address of New Registered Agent 34 City FL 85 Zp Code 37 TAMARAC FL 32 Street Address (P.O. Box Number is Not Acceptable) 38 Batter Address (P.O. Box Number is Not Acceptable) Batter Address (P.O. Box Number is Not Acceptable) 38 Batter Address (P.O. Box Number is Not Acceptable) Batter Address (P.O. Box Number is Not Acceptable) 39 Batter Address (P.O. Box Number is Not Acceptable) Batter Address (P.O. Box Number is Not Acceptable) 39 Batter Address (P.O. Box Number is Not Acceptable) Batter Address (P.O. Box Number is Not Acceptable) 30 Batter Address (P.O. Box Number is Not Acceptable) Batter Address (P.O. Box Number is Not Acceptable) 31 Address (P.O. Box Number is Not Acceptable) Batter Address (P.O. Box Number is Not Acceptable) 31 Address (P.O. Box Number is Not Acceptable) Batter Address (P.O. Box Number is Not Acceptable) 31 | 23 | | 28 | | | | - |
| MARTELLI, JEAN V. 81 Name MARTELLI, JEAN V. 8509 NW 59TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) 7AMARAC FL 3321 83 84 Oity FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutas, the above-named corporation's board of directors. I hereby accept the appointment as 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 accept the obligations of Section 57.0502 and 617.1508, Florida Statutas, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and take apprend to the application of Constructions. Scott of The Part application of Constructions. Thereby accept the appointment as registered agent, and take apprend to the application of Constructions. Thereby accept the appointment as registered agent, and take apprend to the application of Constructions. Thereby accept the appointment as registered agent, and take apprend to the application of Constructions. Thereby accept the appointment as registered agent, and take apprend to the application of Constructions. Thereby accept the appointment as registered agent, and take apprend to the application of Constructions. Thereby accept the appointment as registered agent, and take apprend to the application of Constructions. Thereby accept the appointment as registered agent, and take apprend to the application of Constructions. Thereby accept the application agent and take apprend to the application agent and take applications. Thereby accept the applications agent and take applications. Thereby accept the applications agent and take applicatin agent and tapplications. Thereby accept the applicatio | | | | ' | | | |
| MARTELLI, JEAN V. 8509 NW 59TH STREET TAMARAC FL 33321 82 Steel Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 84 City FL 85 Zip Code 11. Pursuant to the provisions of Socions 617.0502 and 617.1502, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. Tamping with, and accept the obligations of Section 617.0503, Fondia Statutes, the objectors. Thereightered sectors. Thereig | | 9. Name and Address | of Current Regist | ered Agent | 81 Name | 10. Name and Address of New Registered Agent | |
| 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD DELETE 1.1 TITLE DELETE 1.4 ddft NAME MARTELLI, JEAN 1.2 NAME 1.3 STREET ADDRESS DELETE 1.1 TITLE Deleter Change I.4 ddft STREET ADDRESS 8509 NW 59TH STREET 1.3 STREET ADDRESS DELETE 1.4 CITY-ST-ZIP TAMARAC FL I.4 CITY-ST-ZIP I.4 CITY-ST | | | | | 84 City | 85 Zip Co | ode |
| NAME MARTELLI, JEAN 12 NAME STREET ADDRESS 8509 NW 59TH STREET 1.3 STREET ADDRESS CITY-ST-ZP TAMARAC FL 1.4 CITY-ST-ZP TITLE VD DELETE 2.1 TITLE NAME KONKGSBERG, OTTO 2.2 NAME STREET ADDRESS 8109 N W 59 PLACE 2.3 STREET ADDRESS CITY-ST-ZP TAMARAC FL 2.4 CITY-ST-ZIP TITLE SD DELETE 3.1 TITLE STREET ADDRESS 8409 N W 59 PLACE 2.4 CITY-ST-ZIP TITLE SD DELETE 3.1 TITLE STREET ADDRESS 8409 NW 59 TH PLACE 3.2 NAME STREET ADDRESS 8409 NW 59 TH PLACE 3.3 STREET ADDRESS CITY-ST-ZIP TAMARAC FL 3.4 CITY-ST-ZIP TITLE VD X DELETE 4.1 TITLE STREET ADDRESS 8409 NW 59 TH PLACE 3.3 STREET ADDRESS CITY-ST-ZIP TAMARAC FL 4.2 NAME TITLE VD X DELETE 4.1 TITLE STREET ADDRESS 8412 NW 59 TH PLACE 4.2 NAME CITY-ST-ZIP TAMARAC FL 4.4 CITY-ST-ZIP TAMARAC FL THOMARS STREET ADDRESS GITY-ST-ZIP TAMARAC FL 4.0 CITY-ST-ZIP TITLE TAMARAC | office or i agent. I a | registered agent, or both, in m familiar with, and accept | the State of Florida the obligations of, Manual | a. Such change was a Section 617.0503, Flo | as, the above-named uthorized by the con rida Statutes. | corporation submits this statement for the purpose of changing its poration's board of directors. I hereby accept the appointment as re | reaistered |
| TITLE VD DELETE 2.1 TITLE Change Additi NAME KONIGSBERG, OTTO 2.2 NAME 2.3 STREET ADDRESS 2.3 STREET ADDRESS 2.3 STREET ADDRESS STREET ADDRESS 8109 N W 59 PLACE 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP Change Additi TITLE SD DELETE 3.1 TITLE Change Additi NAME EILBERG, JANE 3.2 NAME 3.2 NAME 3.3 STREET ADDRESS Change Additi STREET ADDRESS 8409 NW 59TH PLACE 3.3 STREET ADDRESS 3.3 STREET ADDRESS Change Additi STREET ADDRESS 8409 NW 59TH PLACE 3.3 STREET ADDRESS STREET ADDRESS Change Additi STREET ADDRESS 8409 NW 59TH PLACE 3.4 CITY-ST-ZIP THOMARAC FL 4.2 NAME THOMARS MARTELL i STREET ADDRESS STREET ADDRESS 8412 NW 59TH PLACE 4.3 STREET ADDRESS 8509 N W 59 STREET Change Additi STREET ADDRESS 8412 NW 59TH PLACE 4.3 STREET ADDRESS 8509 N W 59 STREET Change Additi TITLE TAMARAC FL 1 1 Change Additi Additi | office or l agent. I a SIGNATURE 12. | egistered agent, or both, in m familiar with, and accept Storture, typed or printed name of re OFFIC | the State of Florida the obligations of, Manual gistered agent and title if | a. Such change was a Section 617.0503, Flo applicable. (NOTE TORS | as, the above-named uthorized by the con rida Statutes. Registered Agent signature 13. | Corporation submits this statement for the purpose of changing its board of directors. I hereby accept the appointment as re | registered egistered IN 12 |
| STREET ADDRESS 8109 N W 59 PLACE 2.3 STREET ADDRESS CITY-ST-ZIP TAMARAC FL 2.4 CITY-ST-ZIP TITLE SD DELETE 3.1 TITLE NAME EILBERG, JANE 3.2 NAME STREET ADDRESS 8409 NW 59TH PLACE 3.3 STREET ADDRESS CITY-ST-ZIP TAMARAC FL 3.2 NAME STREET ADDRESS 8409 NW 59TH PLACE 3.3 STREET ADDRESS CITY-ST-ZIP TAMARAC FL 3.4 CITY-ST-ZIP TITLE VD XI DELETE NAME LOUISE, FRITZ 3.4 CITY-ST-ZIP TITLE VD XI DELETE NAME LOUISE, FRITZ 3.4 CITY-ST-ZIP STREET ADDRESS 8412 NW 59TH PLACE 4.1 TITLE STREET ADDRESS 8412 NW 59TH PLACE 4.3 STREET ADDRESS CITY-ST-ZIP TAMARAC FL 4.4 CITY-ST-ZIP TTAMARAC FL U DELETE 5.5 OP N W 59 STREET TITLE TO DELETE 5.1 TITLE NAME FRANK, RODERICK 52 NAME Change L Additi | office or n agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS | egisteried agent, or both, in m familiar with, and accept Control of printed name of ra OFFIC PD MARTELLI, JEAN 8509 NW 59TH STREI | the State of Florid the obligations of, gistered agent and tills if SERS AND DIREC | a. Such change was a Section 617.0503, Flo applicable. (NOTE TORS | ss, the above-named uthorized by the con rida Statutes. Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS | Corporation submits this statement for the purpose of changing its board of directors. I hereby accept the appointment as re | registered |
| TITLE SD DELETE 3.1 TITLE Change Addition NAME EILBERG, JANE 3.2 NAME 3.2 NAME 3.3 STREET ADDRESS 3.4 City - ST - ZIP TAMARAC FL 3.4 City - ST - ZIP 3.4 City - ST - ZIP TAMARAC FL 3.4 City - ST - ZIP TAMARAC FL 3.4 City - ST - ZIP THOM AS M ARTELL i STREET ADDRESS 8412 NW 59TH PLACE 4.2 NAME THOM AS M ARTELL i Addition STREET ADDRESS 8412 NW 59TH PLACE 4.3 STREET ADDRESS 8509 N W 59 STREET GS OF N W 59 STREET Change Addition TITLE TD DELETE 5.1 TITLE Change Addition NAME FRANK, RODERICK 52 NAME Change Addition | office or agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST- 2P | egisteried agent, or both, in m familiar with, and accept Control of printed name of ra OFFIC PD MARTELLI, JEAN 8509 NW 59TH STREI TAMARAC FL | the State of Florid the obligations of, gistered agent and tills if SERS AND DIREC | a. Such change was a Section 617.0503, Ro applicable. INOTE TORS | as, the above-named uthorized by the con rida Statutes. Reglatered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST- ZIP | Corporation submits this statement for the purpose of changing its soration's board of directors. I hereby accept the appointment as re //3/98 | registered egistered IN 12 |
| VITLE VD X DELETE 4.1 TITLE QND VICE PRESIDENT X Change Addition NAME LOUISE, FRITZ 4.2 NAME THOMAS MARTELLI STREET ADDRESS 8412 NW 59TH PLACE 4.3 STREET ADDRESS 8509 N W 59 STREET STREET 4.4 CITY-ST-ZIP TAMARAC FL 1.2 NAME 1.4 H R RAC, FL 1.2 Change 1.4 ddition TITLE TD 1.1 DELETE 5.1 TITLE 1.2 Change 1.4 ddition NAME FRANK, RODERICK 5.2 NAME 5.2 NAME 1.1 Change 1.4 ddition | office or i agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS | registeried agent, or both, in m familiar with, and accept Control of printed name of ra- OFFIC PD MARTELLI, JEAN 8509 NW 59TH STREI TAMARAC FL VD KONIGSBERG, OTTO 8109 N W 59 PLACE | the State of Florid the obligations of, gistered agent and tills if SERS AND DIREC | a. Such change was a Section 617.0503, Ro applicable. INOTE TORS | ss, the above-named uthorized by the con rida Statutes. Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS | Corporation submits this statement for the purpose of changing its soration's board of directors. I hereby accept the appointment as re //3/98 | IN 12 |
| TITLE TD L_ DELETE 5.1 TITLE Change _ Addition | office or i agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS | registeried agent, or both, in m familiar with, and accept Control of printed name of ra- OFFIC PD MARTELLI, JEAN 8509 NW 59TH STREI TAMARAC FL VD KONIGSBERG, OTTO 8109 N W 59 PLACE TAMARAC FL SD EILBERG, JANE 8409 NW 59TH PLACI | the State of Florid the obligations of, manufacture gistered agent and tills if ZERS AND DIREC | a. Such change was a Section 617.0503, Ro (applicable. INOTE TORS | as, the above-named uthorized by the con- rida Statutes. Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS | Corporation submits this statement for the purpose of changing its poration's board of directors. I hereby accept the appointment as re //3/9_DATE required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Change Change Change Change | IN 12 |
| STREET ADDRESS 8515 NW 59TH PLACE 5.3 STREET ADDRESS CITY-ST-ZIP TAMARAC FL 5.4 CITY-ST-ZIP | Office or I agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS | egisteried agent, or both, in m familiar with, and accept Control of printed name of ra- OFFIC PD MARTELLI, JEAN 8509 NW 59TH STREI TAMARAC FL VD KONIGSBERG, OTTO 8109 NW 59 PLACE TAMARAC FL SD EILBERG, JANE 8409 NW 59TH PLACI TAMARAC FL VD LOUISE, FRITZ 8412 NW 59TH PLACI | the State of Florid the obligations of. Manual State gistered agent and tills if ZERS AND DIREC | A. Such change was a Section 617.0503, Ro applicable. INOTE TORS | as, the above-named uthorized by the con- rida Statutes, Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE | Corporation submits this statement for the purpose of changing its poration's board of directors. I hereby accept the appointment as re //3/9_DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS D Change Change Change Change Change Change | registered sgistered IN 12 Addition |
| TITLE DELETE 6.1 TITLE Change AddItive NAME 6.2 NAME 6.2 NAME 6.3 STREET ADDRESS GITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP </td <td>Office or i agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS</td> <td>registeried agent, or both, in minimitar with, and accept Correction of the second OFFIC PD MARTELLI, JEAN 8509 NW 59TH STREI TAMARAC FL VD KONIGSBERG, OTTO 8109 N W 59 PLACE TAMARAC FL SD EILBERG, JANE 8409 NW 59TH PLACI TAMARAC FL VD LOUISE, FRITZ 8412 NW 59TH PLACI TAMARAC FL TD FRANK, RODERICK 8515 NW 59TH PLACI</td> <td>the State of Florid the obligations of.</td> <td>A. Such change was a Section 617.0503, Ro (applicable. INOTE TORS DELETE DELETE</td> <td>as, the above-named uthorized by the con- rida Statutes. Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS</td> <td>Corporation submits this statement for the purpose of changing its poration's board of directors. I hereby accept the appointment as re //3/9_DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS DI Change Change Change Change Change Change Change Change Change Change Change</td> <td>registered egistered IN 12 Addition</td> | Office or i agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS | registeried agent, or both, in minimitar with, and accept Correction of the second OFFIC PD MARTELLI, JEAN 8509 NW 59TH STREI TAMARAC FL VD KONIGSBERG, OTTO 8109 N W 59 PLACE TAMARAC FL SD EILBERG, JANE 8409 NW 59TH PLACI TAMARAC FL VD LOUISE, FRITZ 8412 NW 59TH PLACI TAMARAC FL TD FRANK, RODERICK 8515 NW 59TH PLACI | the State of Florid the obligations of. | A. Such change was a Section 617.0503, Ro (applicable. INOTE TORS DELETE DELETE | as, the above-named uthorized by the con- rida Statutes. Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS | Corporation submits this statement for the purpose of changing its poration's board of directors. I hereby accept the appointment as re //3/9_DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS DI Change Change Change Change Change Change Change Change Change Change Change | registered egistered IN 12 Addition |

.