FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 11, 2001 8:00 am Secretary of State DOCUMENT #. 725927 1. Entity Name 04-11-2001 90025 039 ****61.25 TREASURE ISLAND TENNIS & YACHT CLUB CONDOMINIUM Principal Place of Business Mailing Address 10033 9TH ST. N., 2ND FLOOR 10033 9TH ST. N., 2ND FLOOR ST. PETERSBURG FL 33716 ST. PETERSBURG FL 33716 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1564619 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) RAMPART PROPERTIES, INC. 10033 NINTH ST N. 2ND FLOOR City Zip Code ST. PETERSBURG FL 33716 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Department of State **FEE IS \$61.25** Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. STD Change Addition TITLE ☐ Delete TITLE GRABER, JOSEPH NAME STREET ADDRESS STREET ADDRESS 10033 9TH ST. NORTH CR2E037 CITY-ST-ZIP ST. PETERSBURG FL 33716-3805 CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE ARNOLD-MEYER, JUNE NAME STREET ADDRESS STREET ADDRESS 10033 9TH STREET N. 2ND FLOOR CITY-ST-ZIP~ SAINT PETERSBURG FL 33716-3805 CITY-ST-ZIP TITLE Change Addition NAME HARPER, DON Rome, Harold STREET ADDRESS 10033 9TH ST. NORTH 2ND FLOOR ... STREET ADDRESS 10033 9th St. North 2nd F1. CITY-ST-7IP CITY-ST-ZIP ST. PETERSBURG FL 33716-3805 St. Petersburg, FL 33716 Change ☐ Addition TITLE □ Delete TITLE NAME DIMASE, GRACE NAME 10033 9TH ST. NORTH 2ND FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33716 TITLE ☐ Delete TITLE ☐ Change ☐ Addition HOUCK, CHARLIE NAME NAME STREET ADDRESS 10033 9TH STREET N. 2ND FLOOR STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG FL 33716-3805 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition VOLKER, DONRUE NAME NAME STREET ADDRESS 10033 9TH ST N 2ND FL STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL 33716

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.