2002 UNIFORM BUSINESS REPORT (UBR) FILED Feb 11, 2002 8:00 am DOCUMENT # **728671** 1. Entity Name **Secretary of State** BUCKHORN CREEK, INC. 02-11-2002 90114 030 ****61.25 Principal Place of Business Mailing Address P.O. BOX 60 P.O. BOX 60 BRANDON FL 33511 BRANDON FL 33509 Principal Place of Business 3. Mailing Address H33076BluckhörnÜreek Rol P.O. Box <u>6086</u> Suite, Apt. #, etc. Suite Apt # etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For KROA 59-1672167 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7.- Name and Address of New Registered Agent <u>ternandez</u> KADD, LAWRENCE 3215 DOE COURT **BRANDON FL 33511** 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 SIGNATŪRE 🗹 Tai 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE DP X Delete TITLE (9/01 ☐ Change Addition Fernandez Kamie KARP, LAWRENCE NAME NAME STREET ADDRESS 3204 EIK CT 3215 DOE COURT STREET ADDRESS CITY-ST-ZIP **BRANDON FL 33511** CITY-ST-ZIP Brandon FL 33511 Braner Robert D TITLE Delete TITLE ▼ Addition Change FIRST, RICHARD D NAME NAME 802 Humter Ction STREET ADDRESS 907 BUCK COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRANDON FL 33511** D ☐ Delete TITLE ☐ Change **Addition** Barney, Colleen 3205 Elk CT MURPHEE, MARY RUTH NAME NAME STREET ADDRESS 3210 DOE COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FL 33511 BRANDON FL 33511 brandon <u>D3</u> Delete X Addition TITLE ☐ Change LODEZ (ÉLIGENE J 4213 Temple Heights Rd NAME SMITH, BARBARA L NAME STREET ADDRESS 3115 CREEK GLEN COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BRANDON FL 33511 Tampa TITLE ☐ Delete TITI F ☐ Change ▼ Addition FRIEBULIN, COLLEEN Friebolin, Collecn NAME NAME STREET ADDRESS 3203 ELK COURT STREET ADDRESS CITY-ST-ZIP **BRANDON FL 33511** CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME FITZSIMMONS, RITA NAME STREET ADDRESS **804 ANTLER COURT** STREET ADDRESS

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 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 fall other like empowered.

CITY-ST-ZIP

SIGNATURE: TO MILL FILL AND TYPED ON PRINTED NAME OF SIGNATURE AND TYPED ON PRINTED NAME OF SIGNAGO FICER ON DIRECT

CITY-ST-ZIP

BRANDON FL 33511

RECTOR PERUANDEZ

74-03 813-681-20 Daytime Phone #