2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with

SIGNATURE:

address, with all other like empowered.

FILED DOCUMENT # 729393 May 11, 2000 8:00 am Secretary of State 1. Entity Name LOWER MATECUMBE BEACH PROPERTY OWNERS ASSOCIATIO 05-11-2000 90288 031 ****61.25 Principal Place of Business Mailing Address C/O CHARLES MCWHIRTER C/O CHARLES MCWHIRTER 253 SUNSET DR 253 SUNSET DR ISLAMORADA FL 33036-4229 ISLAMORADA FL 33036 US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 23-7372956 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name . MOORE Street Address (F TOWNS, GEORGE 74051 OVERSEAS HWY ISLAMORANDA FL 33036 ISLAMORADA 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 KOLAND H. MOORE SIGNATURE ature, typed or printed name of registered agent and title if applicable 3 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. П Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TITLE Change ☐ Addition ☐ Delete TITLE MOORE, ROLAND NAME NAME STREET ADDRESS 234 SUNSET DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ISLAMORADA FL 33036 Change ☐ Addition **X**Delete TITLE TITLE CHARLES MCWHIRTER DICKMAN, ROBERT J NAME NAME 153 SUNSET DRIVE STREET ADDRESS STREET ADDRESS 92 SUNSET DR. ISLAMORADA, -FLORIDA -- 33036 --CITY:ST:ZIP === Citr™ST÷ZIP ISLAMORADA FL 33036 ☐ Delete Change Addition TITLE TITLE HANSON, RICHARD NAME NAME STREET ADDRESS STREET ADDRESS 107 IROQUOIS DR CITY-ST-ZIP CITY-ST-ZIP ISLAMORADA FL 33036 Change Addition **X** Delete TITLE TITLE MICHAEL HAINES MCWHIRTER, CHARLES NAME NAME 176 IROQUOIS DR STREET ADDRESS STREET ADDRESS 253 SUNSET DR ISLAMORADA FL 33036 CITY-ST-ZIP CITY-ST-ZIP ISLAMORADA FL 33036 Addition D Change ☐ Delete TITLE TITLE THOMAS HANDWORK, JR NAME NICHOLS, GARY NAME 119 IROQUOIS DR STREET ADDRESS STREET ADDRESS 153 IROQUOIS DR ISLAMORADA, FL 33036 CITY-ST-ZIP CITY-ST-ZIP ISLAMORADA FL 33036 Change Change Addition TITLE D ■ Delete TITLE RICHARD MANNING WEBB, RON NAME NAME 256 SUNSET DRIVE STREET ADDRESS STREET ADDRESS 131 N KROME AVE ISLAMORADA, FL 33036 CITY-ST-ZIP CITY-ST-ZIP **HOMESTEAD FL 33030** 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

KOLAND H. MOORE