2000 UNIFORM BUSINESS REPORT (UBR)

FILED May 12, 2000 8:00 am Secretary of State **DOCUMENT # 741159** 1. Entity Name 05-12-2000 90067 020 ****61.25 APPLE CREEK UNIT SIX, INC. Principal Place of Business Mailing Address 7301 W SUNRISE BLVD 7301 W SUNRISE BLVD 731870 PLANTATION FL 33313 PLANTATION FL 33313-4453 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1863274 Not Applicable Zip Country Zip Country **\$8.75** Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent KOBERT HOBART BAGNALL, CHRISTOPHER 7507 W. SUNRISE BLVD PLANTATION FL 33313 City antation 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. MANAGET (NOTE: Registered Agent signature reducted when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Addition ☐ Change ☐ Defete TITLE NAME **BAGNALL, CHRISTOPHER** NAME STREET ADDRESS STREET ADDRESS 7507 W SUNRISE BLVD CITY-ST-ZIP CITY-ST-ZIP <u>PLANTATION, FL 33313</u> TITI F ☐ Delete TITLE Change ☐ Addition NAME PAGAN, WOODROW NAME STREET ADDRESS STREET ADDRESS 7551 W SUNRISE BLVD CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL DS ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME BIRD, JANETTE STREET ADDRESS STREET ADDRESS 7569 W SUNRISE BLVD CITY-ST-ZIP CITY-ST-ZIP PLANTATION, FL 00000 □ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME FISHER, STEWART STREET ADDRESS STREET ADDRESS 7543 W SUNRISE BLVD CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL Change ☐ Addition ☐ Delete TITLE TITLE NAME KING, MARY NAME STREET ADDRESS STREET ADDRESS 7503 W SUNRISE BLVD CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL 33313 Change ☐ Addition Delete TITLE TITLE 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 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

STEWERT FISHER 4/12/2000 Date

changed, or on an attachment with an address, with all other like empowered.