2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Mar 03, 2003 8:00 am Secretary of State

STREET ADDRESS CITY-ST-ZIP NEW-PORT:-RICHEY-FL-34653 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE STREET ADDRESS CITY-ST-ZIP ODELET DELET ODELET ODE	1. Entity Na	JMENT # 750288 KE ESTATES CIVIC ASSOCIAT			01-23-2003 90151 030 ****61.25					
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E. Name and Address of Current Registered Agent COUTURE. ALBERT 4346 OTTER WAY NEW PORT RICHEY R. 34653 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the chigadions of registered agent. SIGNATURE FILE NOW: FEE IS \$61.25 9. Election Company Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE NWE COUTURE, ALBERT STREET ADDRESS CON-51-72 TITLE VPD DATION, LILYAN V NWE OUTTORE WAY OUTS-127 NEW PORT RICHEY FL TITLE VPD DATION, LILYAN V NWE OUTTORE NATE ADDRESS OFFI-51-72 NEW PORT RICHEY-FL-34653 TOWN-51-72 NEW PORT RICHEY-FL-34653 TOWN-51-72 Delde TITLE VPD Delde NWE OUTTORE NATE ADDRESS OFFI-51-72 TITLE VPD Delde NWE OUTTORE, ALBERT TITLE VPD DATION, LILYAN V NWE OUTTORE NATE ADDRESS OFFI-51-72 TITLE VPD Delde NWE OUTTORE NATE OFFI-51-72 TITLE OFFI-51-72 TOWN-51-72 TITLE OFFI-51-72 TOWN-51-72 TITLE OFFI-51-72 TOWN-51-72 TOW	Zip	Country	Zip	Country	,	5. Certificate of State	s Desired	\$8.75 Ac	fditional	
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12. I hereby certify that the information supplied with this filling 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 cath; that i am an officer or director of the corporation or the receiver or trustee empowered to execute this report as frequized by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter 617 on an attachment and dress, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-20-03

2<u>76-376-250</u>