FILED

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

Apr 25, 2003 8:00 am § Secretary of State DOCUMENT # 763613 4-25-2003 90186 043 ****61.25 GLENEAGLES GREEN HOME OWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 11014256 P.O BOX 5263 4400 HWY. 20 E. STE 313 NICEVILLE FL 32578 NICEVILLE FL 32578 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. XXCHECK HERE IF MAKING CHANGES 4. FEI Number 59-2397795 City & State City & State Applied For Not Applicable Zip Country 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 LANDSBERGER, DARLANE Street Address (P.O. Box Number is Not Acceptable) 4400 HWY 20 E . STE 313 NICEVILLE FL 32578 City Zip Code 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. I am familiar with, and accept the obligations of registered agent 4-22-03 DARLANE LANDSBERGER SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. **K**Change Addition TITLE ☐ Delete TITLE MELNICK, NORBERT MELNICK, NORBERT NAME NAME 708 SUNNINGDALE COVE 708 SUNNINGDALE COVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NICEVILLE FL NICEVILLE FL 32578 TD SD TITLE X Delete TITLE ☐ Change **★**Addition PANNELLI, ROBERT PARKS, SANDRA NAME NAME 103 GLENEAGLES DRIVE STREET ADDRESS 111 GLENEAGLES DR STREET ADDRESS NICEVILLE FL 32578 ~ CITY-ST-ZIP NIICEVILLE FL CITY-ST-ZIP -☐ Change X K Addition TITLE. Delete TITLE BOWMAN, ROBERT ROESLEIN, STEPHAN STREET ADDRESS 1624 W OAKMONT CIR STREET ADDRESS 107 GLENEAGLES DRIVE NICEVILLE FL 32578 CITY-ST-ZIP NICEVILLE FL CITY-ST-ZIP ☐ Delete X XChange ☐ Addition KROST, URSULA KROST, URSULA NAME NAME 4436 WINDWARD LANE COVE STREET ADDRESS 108 GLENEAGLES DR STREET ADDRESS NICEVILLE FL 32578 CITY-ST-ZIP NICEVILLE FL CITY-ST-ZIP Delete TITLE D Change **X**Addition TITLE BRENNAN, MAURA 143 GLENEAGLES DRIVE **NEILAN, DOREEN** NAME NAME STREET ADDRESS 51 GLENEAGLES DR STREET ADDRESS CITY-ST-ZIP NICEVILLE FL 32578 CITY-ST-ZIP NICEVILLE FL 32578 ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME

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 all other like empowe

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

MELNICK 4/10/03 EDNORBERT