2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 764947

FILED Apr 29, 2003 Secretary of State

Entity Name: GREEN BRIAR TOWNHOUSE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1401 GREENBRIAR PKWY STE 4 GULF BREEZE, FL 32563

3321 811222,12 32333

Current Mailing Address: New Mailing Address:

1401 GREENBRIAR PKWY

STE 4

GULF BREEZE, FL 32563

1120 E CERVANTES
PENSACOLA, FL 32501

FEI Number: 59-2913129 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

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.

SIGNATURE: RICHARD G STUCKEY 04/29/2003

Electronic Signature of Registered Agent Date

City-St-Zip:

OFFICERS AND DIRECTORS:

GULF BREEZE, FL 32561

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PENSACOLA, FL 32501

itle: PD () Delete Title: PD (X) Change () Addition

Name:STUCKEY, RICHARD GName:STUCKEY, RICHARD GAddress:1401 GREENBRIAR PKWY, STE 4Address:1120 E CERVANTES STCity-St-Zip:GULF BREEZE, FL 32561City-St-Zip:PENSACOLA, FL 32501

Title: VPD () Delete Title: VPD (X) Change () Addition

Name: BURDA, BRIAN B Name: BURDA, BRIAN J
Address: 1401 GREENBRIAR PKWY STE 4 Address: 1120 E CERVANTES ST

Title: VD () Delete Title: VD (X) Change () Addition

Name: HOUSER, GEORGE Name: HOUSER, GEORGE

Address: 1401 GREENBRIAR PKWY STE 1
City-St-Zip: GULF BREEZE, FL 32561
Address: 1401 GREENBRIAR PKWY STE 1
City-St-Zip: GULF BREEZE, FL 32563

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD G STUCKEY PD 04/29/2003