2000 UNIFORM BUSINESS REPORT (UBR)

FILED May 26, 2000 8:00 am Secretary of State **DOCUMENT # 768966** 1. Entity Name ROTONDA WEST FLOTILLA, INC. 05-26-2000 90117 033 ****61.25 Mailing Address Principal Place of Business 240 CAPSTAN DR 240 CAPSTAN DR CAPE HAZE FL 33946-2220 CAPE HAZE FL 33946 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEi Number 59-1808772 Not Applicable \$8:75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) CORBIN, ELDON D 240 CAPSTAN DR CAPE HAZE FL 33946 Zip Code City 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. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make Check Payable to 9. Election Campaign Financing **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. CR2E037 (9/99) Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME CORBIN, ELDON D STREET ADDRESS STREET ADDRESS 240 CAPSTAN DR. CITY-ST-ZIP CITY-ST-ZIP CAPE HAZE FL 33946 VPD E Delete Change X Addition TITI F TITLE NAME REINER, Phyllis J. DONOVAN, KENNETH C STREET ADDRESS STREET ADDRESS 138.ROTONDA.CIRCLE 7_BROADMOOR_ROAD_ CITY-ST-ZIP CITY-ST-ZIP ROTONDA WEST FL 33947 Rotonda West, FL 33947 Change ☐ Addition ☐ Delete TIT! F TITLE TD NAME NAME BROKAW, RICHARD L STREET ADDRESS STREET ADDRESS 8171 DREW ST. CITY-ST-7IP CITY-ST-ZIP ENGLEWOOD FL 34224 SD Addition Delete Change TITLE SD TITLE SAFIGAN, Andrew NAME NAME MARCOTTE, JEAN A 262 Anapolis Lane STREET ADDRESS STREET ADDRESS 4255 TREETOPS DR Rotonda West, FL 33947 CITY-ST-ZIP CITY-ST-ZIP PT CHARLOTTE FL 33953 D X Addition X Delete Change TITLE NAME FAUST, Gerald S. NAME HADDEN, STUART M STREET ADDRESS STREET ADDRESS 5755 David Boulevard 8 ANNAPOLIS LANW CITY-ST-ZIP CITY-ST-ZIP Port Charlotte, 33981 ROTONDA WEST FL 33947 ☐ Change ▲ Addition TITLE ☐ Delete TITLE KELLY, James E. NAME HUDSON, WISHEART F NAME STREET ADDRESS 3 Sportsman Court STREET ADDRESS 9252 W. SPRING CIRCLE CITY-ST-ZIP Rotonda West, FL 33947 CITY-ST-ZIP PORT CHARLOTTE FL 33981 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 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 empowered.

ELDON D N CORBIN PDP 30 April 2000 941-697-2274

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

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