2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # F20045 Jan 19, 2000 8:00 am 1. Entity Name **Secretary of State HUTTONS TRAILER PARK, INC.** 01-19-2000 90223 038 ***150.00 Principal Place of Business Mailing Address 9100 HWY 78 WEST 9100 HWY 78 WEST OKEECHOBEE FL 34974 OKEECHOBEE FL 34974 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 35-1503027 Not Applicable Country Zip Country Zip \$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 CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PTD Change ■ Addition TITLE ☐ Delete TITLE HUTTON, ROGER A. NAME NAME STREET ADDRESS 9100 HWY. 78, W. STREET ADDRESS CITY-ST-ZIP OKEECHOBEE, FL 0 CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE HUTTON, JANET V. NAME STREET ADDRESS STREET ADDRESS 9100 HWY. 78, W. CITY-ST-ZIP CITY-ST-ZIP OKEECHOBEE, FL 0 ☐ Addition ☐ Change ☐ Delete TITLE HUTTON, JOSEPH A. NAME STREET ADDRESS STREET ADDRESS 9100 HWY. 78, W. CITY-ST-ZIP CITY-ST-ZIP OKEECHOBEE FL ☐ Change ☐ Addition TITLE ☐ Delete TITLE HUTTON, JACK A. NAME NAME STREET ADDRESS STREET ADDRESS 9100 HWY. 78, W. CITY-ST-ZIP CITY-ST-ZIP OKEECHOBEE FL ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-ZiP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADORESS CiTY-ST-ZIP C!TY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

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863-763-5627

Daytime Phone #