2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

SIGNATURE:

NATURE AND TYPED OR PRINTED NA

Mar 03, 2003 8:00 am Secretary of State DOCUMENT # F34997 03-03-2003 90907 039 ***150.00 1. Entity Name GRAND SHORES WEST MANAGEMENT, INC. Principal Place of Business Mailing Address 1301 FOURTH STREET NORTH 1301 FOURTH STREET NORTH PO-BOX 27-PO BOX 27 ST PETERSBURG FL 33701 ST PETERSBURG FL 33701 2. Principal Place of Business 3. Mailing Address 757 Arlington Ave., North Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-2225183 Not Applicable Zio 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 MEROS PETER N Street Address (P.O. Box Number is Not Acceptable) 757 Arlington Ave., Not 1991 4TH STREET NORTH, BOX 27. ST PETERSBURG FL 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 Fforida. I am familiar with, and accept the obligations of registered agent. 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. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Make Check Payable to Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Addition NAME PAPOLOS, ROBERT NAME STREET ADORESS 17350 GULF BLVD STREET ADDRESS CITY-ST-71P N REDINGTON BCH FL CITY-ST-ZIP TITLE STD ☐ Delete TITLE **X** Change Addition NAME WALTER SMITH NAME STREET ADDRESS 757 Arlington Avenue North 1301 4TH STREET N STREET ADDRESS CITY-ST-ZIP ST PETERSBURG FL St. Petersburg, FL 33701 CITY-ST-ZIP TITLE VD. Delete TITLE Change ☐ Addition NAME PATRICIA DELLANE NAME STREET ADDRES 1301 FOURTH STREET NORTH 17350 Gilf Boulevard STREET ADDRESS CITY-SI-ZIP ST. PETERSBURG FL CITY-ST-ZIP N. Redington Beach, FL 33708 TITLE Delete TITLE ☐ Change ☐ Addition MAME PAPOLOS, LINDA NAME STREET ADDRESS 17350 GULF BLVD STREET ADDRESS CITY-ST-ZIP NO RED BCH FL 33708 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change . ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certily that the information supplied with this filing does not qualify to 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 an execute the report as reported or the corporation or the receiver or trustee empowered of execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

FILED

Cavtime Phone #