2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 02, 2001 8:00 am Secretary of State DOCUMENT # F9700001485 1. Entity Name SUN CITY CENTER GOLF PROPERTIES. INC. 04-02-2001 90380 001 ***750.00 Principal Place of Business Mailing Address 24301 WALDEN CENTER DRIVE 24301 WALDEN CENTER DRIVE BONITA SPRINGS FL 34134 BONITA SPRINGS FL 34134 67228 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 59-3439449 Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HASTINGS, VIVIEN Street Address (P.O. Box Number is Not Acceptable) 24301 WALDEN CENTER DR. **BONITA SPRINGS FL 34134** 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 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, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. CCEO TITLE ☐ Change Addition TITLE ☐ Defete HOFFMAN, ALFRED JR. NAME NAME 24301 WALDEN CENTER DR STREET ADDRESS STREET ADDRESS **BONITA SPRINGS FL 34134** CITY-ST-ZIP CITY-ST-ZIP D/SVP/T TITLE X Delete ☐ Change ★ Addition James P. Dietz ACKERMAN, DON E NAME NAME 24301 Walden Center Drive 24301 WALDEN CENTER DR STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BONITA SPRINGS FL 34134** Bonita Springs, FL 34134 DP X Change ☐ Addition TITLE ☐ Delete TITLE STARKEY, JERRY L Jerry L. Starkey NAME NAME 24301 WALDEN CENTER DR STREET ADDRESS 24301 Walden Center Drive STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP **BONITA SPRINGS FL 34134** Bonita Springs, FL 34134 TITLE TITLE SVP Change ☐ Addition ☐ Delete FLINN, MILTON G NAME NAME Milton G. Flinn 24301 WALDEN CENTER DR STREET ADDRESS STREET ADDRESS 24301 Walden Center Drive CITY-ST-ZIP CITY-ST-ZIP **BONITA SPRINGS FL 34134** <u>Bonita Springs, FL 34134</u> TITLE ☐ Delete ☐ Change *X Addition Vivien N. Hastings NAME NAME STREET ADDRESS STREET ADDRESS 24301 Walden Center Drive CITY-ST-ZIP CITY-ST-ZIP Bonita Springs, FL 34134 Delete TITLE TITLE Change Tat Addition Robert C. Beyer, Jr. NAME NAME STREET ADDRESS STREET ADDRESS 24301 Walden Center Drive CITY-ST-ZIP Bonita Springs, FL 34134

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.

Vivien N. Hastings. Secretary

3/12/01

941-947-2600

CR2E034 (10/00

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AS 12.

Sylvia Keith 24301 Walden Center Drive Bonita Springs, FL 34134