2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # F9800006625 Apr 28, 2000 8:00 am Secretary of State 1. Entity Name PELICAN LANDING GOLF RESORT VENTURES, INC. 04-28-2000 90449 001 ***900.00 Principal Place of Business Mailino Address 24301 WALDEN CENTER DRIVE 24301 WALDEN CENTER DRIVE **BONITA SPRINGS FL 34134** BONITA SPRINGS FL 34134-4920 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3543499 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent Name HASTINGS, VIVIEN N Street Address (P.O. Box Number is Not Acceptable) 24301 WALDEN CENTER DRIVE **BONITA SPRINGS FL 34134** Zip Code FL 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 10. Election Campaign Financing \$5.00 May Be 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. **K**KAddition ☐ Change TITLE ▼ Delete TITLE Dietz, James P. SCHMOYER, JERRY H NAME NAME STREET ADDRESS 24301 Walden Center Drive STREET ADDRESS 24301 WALDEN CENTER DRIVE CITY-ST-ZIP CITY-ST-ZIP Bonita Springs, FL 34134 BONITA SPRINGS FL 34134 ☐ Addition DV ☐ Delete TITLE ☐ Change TITLE NAME FRY, DAVID L NAME STREET ADDRESS STREET ADDRESS 24301 WALDEN CENTER DRIVE CITY-ST-ZIP CITY-ST-ZIP **BONITA SPRINGS FL 34134** DVT **KX**Change ☐ Addition TITLE ☐ Delete TITLE ADELMAN, STEVEN C NAME Adelman, Steven C. NAME STREET ADDRESS STREET ADDRESS 24301 WALDEN CENTER DRIVE 24301 Walden Center Drive CITY-ST-ZIP CITY-ST-ZIP **BONITA SPRINGS FL 34134** Bonita Springs, FL 34134 □ Change Addition ☐ Delete TITLE TITLE PIERCE, STEPHEN C NAME NAME STREET ADDRESS STREET ADDRESS 24301 WALDEN CENTER DRIVE CITY-ST-ZIP CITY-ST-ZIP **BONITA SPRINGS FL 34134** ☐ Change ☐ Addition TITLE ٧S ☐ Delete TITLE HASTINGS, VIVIEN N NAME NAME

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.

TITLE

NAME

STREET ADDRESS CITY-ST-7IP

STREET ADDRESS

CITY-ST-ZIP

Vivien Hastings, Vice President/Secretary SIGNATURE:

☐ Delete

4/11/00 Date

Cullen, James D.

24301 Walden Center Drive

(941) 947-2600

☐ Change

Addition

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE NAME 24301 WALDEN CENTER DRIVE

BONITA SPRINGS FL 34134

Daytime Phone #