FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 24, 2002 8:00 am DOCUMENT # G04253 **Secretary of State** 1. Entity Name 02-24-2002 90069 046 ***150.00 VILLAGE GREEN GOLF CLUB OF SARASOTA. INC. Principal Place of Business Mailing Address C/O JACK T BINSWANGER C/O JACK T BINSWANGER 3500 PEMBROOK DR 3500 PEMBROOK DR SARASOTA FL 34239 SARASOTA FL 34239 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 Applied For 59-2225961 Not Applicable Zip Zip 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 BINSWANGER, JACK T Street Address (P.O. Box Nurma in Not Acceptable) 5208 BAY SHORE RD SARASOTA FL 34234 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 (NOTE: Registered Agent signature required when reinstating) a typed or printed name of registered agent and titlenf applicable 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11., 12 Addition CR2E034 (9/01) TITLE ☐ Delete TITLE ☐ Change NAME BINSWANGER, JACK NAME STREET ADDRESS STREET ADDRESS 5208 BAY SHORE RD CITY-ST-ZIP CITY-ST-7IP SARASOTA FL 34234 ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME TOALE, MICHAEL H NAME STREET ADDRESS 1761 MACKINTOSH BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NOKOMIS FL 34275 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME WINKLER, ERIC 3500 PEMBROOK DR. STREET ADDRESS STREET ADDRESS 3500 PEMBROKE DRIVE CITY-ST-ZIP CITY-ST-ZIP Sarasota FL 34239 Delete TITLE TITLE Addition ☐ Change BINSWAGNER, JOSEPH P NAME NAME STREET ADDRESS STREET ADDRESS 3500 Pembrook Dr CITY-ST-ZIP CITY-ST-ZIP Sarasota FL 34239 Delete ☐ Addition TITLE TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICIAR OR DIRECTOR