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SILAKE BUENA VISTA_FL 28 LAKE BUENA VISTA_FL Trust Fund Contribution Added to February Added t			-			,			5. Certificate of Status Desired \$8.75 Additional Fee Required
9. Name and Address of Current Registered Agent YU, CYNTHIA C/O MARCO POLO COLUMBUS & FERRARI 9101 SR 535, SUITE 300 ORLANDO, FL 32836 44 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of agent. Journal of the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and information with a deposit and only of Spooth the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of agent. Journal of the purpose of changing its register of agent. Journal of the purpose of changing its registered agent. Jou	3 LAKE BUE							L	
YU, CYNTHIA C/O MARCO POLO COLUMBUS & FERRARI 9101 SR 535, SUITE 300 ORLANDO, FL 32836 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Floridal Statutes, the above-named corporation submits this statement for the purpose of changing lits register of genic registered agenic regis	,4 32830	[25]	JS T	₂₉ 32830		_		<u> </u>	Personal Property Tax. ☐ Yes ☐ No
12.	11. Pursuant to office or reg agent. I am	•		nd 607.1508, Florida. Such c s of, Section 6			bove d by ti cutes.	-named o	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
DELETE	SIGNATURE	nature, typed or plinted ha	of registered agent and	title dapplicable	(NOTE: R	HIA	Y [] I Agent	signature re	equired when reinstating) 8/10/1999
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STREET ADDRESS
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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, of on an attachment with an address, with all other like empowered. NELSON YING

SIGNATURE: _

NELSUN YING SIGNATURE SUPTIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/10/1999

(407)-876-1793