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Secretary of State

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PROFIT CORPORATION
 ANNUAL REPORT
 1999

FLORIDA DEPARTMENT OF STATE
 Katherine Harris,
 Secretary of State
 DIVISION OF CORPORATIONS



DOCUMENT # H48023 ✓

1. Corporation Name

Walden Woods of Sugarmill, Inc.

Principal Place of Business

Mailing Address

Homosassa, Florida

10455 S. Suncoast Blvd.
Homosassa, FL 34446

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

March 20, 1985

4. FEI Number

59-2538943

Applied For

Not Applicable

5. Certificate of Status Desired ☒ X\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible

Personal Property Tax ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

Corporation Information Services, Inc.
502 E. Park Avenue
Tallahassee, FL 32301

10. Name and Address of New Registered Agent

81 Name

ESC - Austin STEPHEN R FOSTER

82 Street Address (P.O. Box Number is Not Acceptable)

8887 PELICAN BAY

83

One Commodore Plaza Bldg. Suite 400

84 City

888 Brazos, Suite 750

85

AUSTIN, TX 78701

Zip Code 78701

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 registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Robert Miller
1835 Jessica Rd.
Clearwater, FL 33575☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☒ AdditionMichael J. Pilgrim
President and CEO
1000 Ballpark Way, Suite 210
Arlington, TX 76011

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

Date

Daytime Phone #

6/15/99

817/861-4000

CR2E034 (11/98)