

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 24, 2006 8:00 am**  
**Secretary of State**

04-24-2006 90361 033 \*\*\*150.00

|                                                                      |                                                                                   |
|----------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| DOCUMENT # J86663                                                    |  |
| 1. Entity Name<br><b>LARGO I.I.T.S. HOMEOWNERS ASSOCIATION, INC.</b> |                                                                                   |

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|                                                                                                                                                                                                |                                                                                                                                                                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2. Principal Place of Business<br><b>1001 STARKEY ROAD</b><br>Suite, Apt. #, etc.<br><b>LOT 58A</b><br>City & State<br><b>LARGO, FL</b><br>Zip<br><b>33771</b> Country<br><b>(PINELHAS) US</b> | 3. Mailing Address<br><b>1001 STARKEY ROAD</b><br>Suite, Apt. #, etc.<br><b>LOT 58A</b><br>City & State<br><b>LARGO, FL</b><br>Zip<br><b>33771</b> Country<br><b>US</b> |
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| <b>DO NOT WRITE IN THIS SPACE</b> | 4. FEI Number <b>59-2745265</b>                                                                                                                                                 |  | Applied For<br><input type="checkbox"/> No; Applicable |
|                                   | 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                       |  | <b>\$8.75</b> Additional Fee Required                  |
|                                   | 7. Name and Address of Current Registered Agent                                                                                                                                 |  |                                                        |
|                                   | Name <b>PAUL F. APPLE</b><br>Street Address (P.O. Box Number is Not Acceptable)<br><b>1001 STARKEY ROAD</b><br><b>LOT 14</b><br>City <b>LARGO, FL.</b> FL Zip Code <b>33771</b> |  |                                                        |

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Paul F. Apple* **PAUL F. APPLE PRESIDENT** **4/20/06**  
Signature of officer or principal of registered agent and sole proprietor (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

|                                                |                                                                                                           |
|------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>PRESIDENT</b><br><b>PAUL F. APPLE</b><br><b>1001 STARKEY RD. LOT 14</b><br><b>LARGO, FL 33771</b>      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>VICE-PRESIDENT</b><br><b>DONALD DUFFY</b><br><b>1001 STARKEY RD. LOT 615</b><br><b>LARGO, FL 33771</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>SECRETARY</b><br><b>DEBBIE VREDECOOR</b><br><b>1001 STARKEY RD. LOT 500</b><br><b>LARGO, FL 33771</b>  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>TREASURER</b><br><b>FLORENCE SHEILDS</b><br><b>1001 STARKEY RD. LOT 333</b><br><b>LARGO, FL 33771</b>  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>DIRECTOR</b><br><b>PAUL MEHL</b><br><b>1001 STARKEY RD. LOT 587</b><br><b>LARGO, FL 33771</b>          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>DIRECTOR</b><br><b>ROTH CHARRON</b><br><b>1001 STARKEY RD. LOT 126</b><br><b>LARGO, FL 33771</b>       |

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12. 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 supplementary 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 10 or on an attachment with an address with all other like empowered.

SIGNATURE: *Paul F. Apple* **PAUL F. APPLE - PRESIDENT** **4/20/06** **(727) 530-4633**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/02)