2001 UNIFORM BUSINESS REPORT (UBR) May 11, 2001 8:00 am Secretary of State **DOCUMENT # K72728** RON'S ISLAND COURT, INC. 05-11-2001 90059 035 ***150.00 Principal Place of Business Mailing Address 5457 87TH STREET 6635 110TH PLACE SEBASTIAN FL 32958 SEBASTIAN FL 32958 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 65-0117379 Not Applicable Zip Country Zip 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 Name GAUDET, RONALD F. Street Address (P.O. Box Number is Not Acceptable) 6635 110TH PLACE SEBASTIAN FL 32958 City Zip Code 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 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, 2001 Fee will be \$550.00 Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 THUE ☐ Delete TITLE Change ☐ Addition NAME GAUDET, RONALD F. NAME STREET ADDRESS 6635 110TH PLACE STREET ADDRESS CITY ST-ZIP SEBASTIAN FL CITY-ST-ZIP TITLE De:ete TITLE Change Addition DUBINSKY, KAREN NAME NAME STREET ADDRESS 528 SOUTH ST STREET ADDRESS CiTY-ST-ZiP EAST AURORA NY CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition FRANKO, SUZANNE M. NAME NAME 6329 SCHERFF RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORCHARD PARK NY CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition CHRISTY, LYNN M. NAME NAME STREET ADDRESS 216 LONGVIEW DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JEFFERSONVILLE IN TITLE Delete TITLE ☐ Change ☐ Addition GAUDET, JUNE M. NAME NAME STREET ADDRESS 6635 110TH PLACE STREET ACCRESS CITY-ST-7IP

13. I hereby certify that the information supplied with this filing does not qualify indicated on this report or supplemental report is frue and accurate and the or the exemption stated in Section 119.07(3)(i), Florida Statutes. I further cortify that the information it my signature shall have the same legal effect as if made under oath; that I am an officer or director or tas required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if indicated on this report or supplemental report of the corporation or the receiver or trustee ex o execute this r changed, or on an attachment with an add ther like empo

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Change

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