2001 UNIFORM BUSINESS REPORT (UBR) 100000004502 DOCUMENT # FILED 1. Entity Name 01 APR 25 AM 7: 33 COLLIER TALLAHASSEE COMMUNITIES LLC SECRETARY OF STATE TALLAHASSEE, FLORIDA Mailing Address Principal Place of Business 220 N. MAIN STREET P.O. BOX 13116 GAINESVILLE FL 32604 GAINESVILLE FL 32601 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number Not Applicable Zip Country Zip Country \$5.00 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 COLLIER, NATHAN S Street Address (P.O. Box Number is Not Acceptable) 220 N. MAIN STREET GAINESVILLE FL 32601 Zip Code City FL . 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 900004163739--9 FILE NOW!!! FEE IS \$50.00 -05/08/01--01139--027 Make Check Payable to Department of State _*****55.00 *****55.00 * ADDITIONS/CHANGES MANAGING MEMBERS/MEMBERS 10. Addition ☐ Delete ☐ Change 16 TITLE MGRM NAME MF COLLIER, NATHAN \$ STREET ADDRESS REET ADDRESS 220 N. MAIN STREET CITY-ST-ZIP Y-ST-ZIP GAINESVILLE FL 32601 ☐ Change ☐ Addition Delete LΕ TITLE NAME REET ADDRESS STREET ADDRESS Y-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change Æ. Delete Æ NAME STREET ADDRESS IEET ADDRESS 1-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition 3. ☐ Delete JID F 1E NAME STREET ADDRESS EET ADDRESS '-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME ET ADDRESS STREET ADDRESS -ST-ZiP CITY-ST-ZIP ☐ Addition ☐ Change Delete TITE F NAME ET ADDRESS STREET ADDRESS -ST-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section indicated on this report is true and accurate and that my signature shall have the same legal effect as if made limited liability company or the receiver or trustee empowered to execute this report as required by Chartel States and the control of th (19.07(3)(i), Florida Statutes, I further certify that the information upder oath; that I am a managing member or manager of the B. Florida Statutes.

CR25083 (11/00)