2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 06, 2001 8:00 am
Secretary of State
07-19-2001 90005 011 ****61.25

DOCUMENT # N00000002720

1. Entity Name

PINE ISLAND - HAVANA CALOOSA INDIAN FOUNDATION,

Principal Place of Business	Mailing Address
13681 FICUS TREE LANE PINE ISLAND FL 33945	P O BOX 569 PINELAND FL 33945

13681 FICUS TREE LAND P.O. Box 569

2. Principal Place of Business	3. Mailing Address
PINE ISLAND.	PINELAND FLA 33945
Suite, Apt. #, etc. FLA.	Suite, Apt. #, etc.
City & State	City & State FLA.
Zip 33645 Country CEE	Zip 33945 Country CEE

1994

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-2821599 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HIGGINBOTTOM, DAVID B 101 E WALL STREET FROSTPROOF FL 33843	Name ROBB R. TILLER Street Address (P.O. Box Number is Not Acceptable) 1715/75 STRING FELLOW RD. City BOKEELIA FL Zip Code 33922

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 Pres DATE 4/6/2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
After September 12, 2001, min. will be $236.25

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Robb Tiller PO Box 569 Pineland, FL. 33945	☐ Delete "D"	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Isbell Tiller "T" PO Box 569 Pineland, FL 33945	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Damon Smith "T" 1452 N. Central Ave Flagler Beach, FL. 32136-2915	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer James Kincadell "T" 2600 N.E. 15th ST Pomp. FL. 33304	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (5/01)

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 supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 4/6/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #