2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 09, 2007 8:00 am DOCUMENT # N00000008436 Secretary of State 1. Entity Name 04-09-2007 90041 008 ****61.25 NATURE COAST LANDINGS MASTER ASSOCIATION, Principal Place of Business Mailing Address 10173 N SUNCOAST BLVD 10173 N SUNCOAST BLVD CRYSTAL RIVER FL 34428 CRYSTAL RIVER FL 34428 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. # etc. Suite, Apt. #, etc 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 59-3687695 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 Namo EYSTER, JAMES Street Address (P.O. Box Number is Not Acceptable) 10173 N SUNCOAST BLVD CRYSTAL RIVER FL 34428 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable INCITE Registerers Agent signature required when reinstating, DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 11111 X Deleie Addition HILLE Change BEST, ROBERT 10173 N. SUNCOAST BULD #39 NAME EYSTER, JAMES P NAME STREET ADDRESS 10173 N SUNCOAST BLVD STREET LADORESS CITY ST ZIP CRYSTAL RIVER FL 34428 CHY ST ZIP CRYSTAL RIVER, FL 34428 HILE DVS Delete ☐ Change ш Addition BESSLUR, DON 10173 N. SUNCOAST BLVD NAMI ROBERTS, NATALIES NAME STREET ADDRESS STREET ADORESS 10173 N SUNCOAST BLVD CHY ST ZIP **CRYSTAL RIVER FL 34428** CITY ST ZIP ISTAL RIVER, FL 34428 THE Addition 🖊 Delete mee NAME cross, Fred WEST, CARLENE MAKAE STREET ADDRESS STREET ADDRESS 10173 N. SUNCOAST BLUD 10173 N SUNCOAST BLVD CHY ST-ZIP **CRYSTAL RIVER FL 34428** CHY ST 7P CRYSTAL KIVER, FL 34428 ____ Change ☐ Delete TITLE Addition NAME STREET ADDRESS STREET ADDOESS CITY ST-ZIP CITY ST ZIP TITLE Delete IIILE ☐ Change ☐ Addition NAME MANE STREET ADDRESS STREET ADORESS CITY ST-7IP CITY ST 7/P OTLE ☐ Delete HHE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CHY ST 7/P

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 eath; that I am an officer or director of the corporation or the receiver or trystee 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 will an address, with all other like empowered.

SIGNATURE:

ROBERT BEST

3k00/07 352-586-2750

FILED