2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

FILED **DOCUMENT # N00313** Apr 26, 2000 8:00 am Secretary of State THE OCEAN GALLERY VILLAGE DEL LAGO CONDOMINIUM A 04-26-2000 90465 001 ***306.25 Principal Place of Business Mailing Address 4600 A1A SOUTH 4600 A1A SOUTH ST. AUGUSTINE FL 32084 ST. AUGUSTINE FL 32084-9478 2. Principal Place of Business 3. Mailing Address Suite, Apt. #. etc DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2491346 Not Applicable Zip Country Country \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) GEIGER, JOHN R 4475 US 1 SOUTH Zip Code City ST. AUGUSTINE FL 32086 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. TITLE TITLE ☐ Delete MORRIS, ELIZABETH NAME NAME 4600 AIA 5, VOL 10-2 4600 HWY A1A S VDL 2-3 STREET ADDRESS STREET ADDRESS ST. AUGUSTINE, FL 32084 SAINT AUGUSTINE FL 32084 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE TABER, CHARLES SHANLEY, SANDRA NAME NAME HOOD AIA S, VOL 3-7 ST. AUGUSTINE, FL 3 4600 HWY A1A S VDL 10-2 STREET ADDRESS STREET ADDRESS SAINT AUGUSTINE FL 32084 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE NABER, CHARLES Davalle, DONOLD NAME NAME 4600 A1A SOUTH VDL 3-7 STREET ADDRESS 4600 AIA S, STREET ADDRESS SAINT AUGUSTINE FL 32084 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE SCOVILLE, FRED NAME NAME 4600 HWY A1A S VDL 3-3 STREET ADDRESS STREET ADDRESS SAINT AUGUSTINE FL 32084 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change Delete TITLE PLANT REUBEN NAME NAME 4600 HWY, A1A, S., VDL 8-4 STREET ADDRESS STREET ADDRESS SAINT AUGUSTINE FL 32084 CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition TITLE ☐ Delete **NULLETT, WALTER** NAME NAME 4600 HWY A1A SOUTH VDL 4-2 STREET ADDRESS STREET ADDRESS SAINT AUGUSTINE FL 32084 CITY-ST-ZIP CITY-ST-ZIP 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

Daytime Phone #