2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

May 02, 2002 8:00 am Secretary of State DOCUMENT # N0100002559 05-02-2002 90158 021 ****61.25 GEM ESTATES M H V ASSOC., INC. Principal Place of Business Mailing Address 39412 FLGIN DR 39412 ELGIN DR. ZEPHYRHILLS FL 33540 ZEPHYRHILLS FL 33540 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 59-2391100 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name OTT, LESTER A Street Address (P.O. Box Number is Not Acceptable) 39412 ELGIN DR. ZEPHYRHILLS FL 33540 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. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE **XX**Delete TITLE (9/01) ☐ Change X-Addition NAME JOYCE, EDWARD NAME MARTIN, ERNEST STREET ADDRESS 39432 STERLING DR. STREET ADDRESS CR2E037 39600 STERLING CITY-ST-ZIP ZEPHYRHILLS FL 33540 CITY-ST-ZIP ZEPHYRHILLS, FL 33540 7171 F ☐ Delete TITLE ☐ Change ☐ Addition NAME trundy, John NAME STREET ADDRESS 39450 DUNDEE RD. STREET ADDRESS CITY-ST-ZIF ZEPHYRHILLS FL 33540 CITY-ST-ZIP TITLE ~>ExcDelete == TITLE. Change Addition . GREENWOOD, TOM NAME GREEN, THOMAS NAME STREET ADDRES 39539 SYCAMORE LANE STREET ADDRESS 39621 ROCKFORD CITY-ST-ZIP ZEPHYRHILLS FL 33540 CITY-ST-ZIP ZEPHYRHILLS, FL TITLE Du plicate ☐ Change ☐ Addition OTT. LESTER A STREET ADDRESS 39514 SYCAMORE LANE STREET ADDRESS CITY-ST-ZIP ZEPHYRHILLS FL 33540 CITY-ST-ZIP Delete TITLE Change Addition NAME SPRINGER, HELEN NAME STREET ADDRESS 39352 SYCAMORE LANE Duplicate STREET ADDRESS CITY-ST-7/P ZEPHYRHILLS FL 33540 CITY-ST-ZIP TITLE TITLE ☐ Change Addition HULETT, ALICE NAME STREET ADDRESS 39352 SYCAMORE LANE Duplicate STREET ADDRESS ZEPHYRHILLS FL 33540 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 path; that I am an officer or director of the corporation or the receiver or justee 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 an other like empowered.

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