2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED May 05, 2003 8:00 am Secretary of State

DOCUMENT # NO200006422 1. Entity Name NATURAL BRIDGE PLANTATIONS OWNERS ASSOCIATION, I NC.							04-07-2003 90185 008 ****61.25						
Principal Pla	ce of Busines	is											
261 SANDTR	AP RD.			261 SANDTRAP RD. 2-C									
DESTIN FL 3	2541		DESTIN FL 32541				 						
	Place of Busi	ness	261 So										
Suite, Apt. #, etc.			Suite, Apt. #, et	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
City & State			Destin				4. FEI Number 72 - /5	Applied For Not Applicable					
Žip	Zip Country		Zip 32541	S41 Country			5. Certificate of S		\$8.75 Additional Fee Required				
	6. Name	and Address of Current F		stered Agent			7. Name and Address of New Registered Agent]_	
:: ATD 6 T (Name Strother, J-Barron-										
281 SAN	ier, j. bari Iotrap Rd.			Street .			Address (P.O. Box Number is Not Acceptable) 26 Sand Trap Road						
2-C DESTIN	FL 32541						<u>- с</u>						
							estin	FL Z			32541		
the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. Added to Fees Florida Department of Sta													
10.		OFFICERS AND DIRE	CTORS	11.			DDITIONS/CHANG		<u> </u>			-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5299 EAS	ON, JEREMY A THIGHWAY 30-A, # 330 DSA BEACH FL 32459	☐ Delete	TITLE NAME STREE			irector			Change	Addition	CR2E037 (10/02)	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STROTHE 261 SAND DESTIN FI	R, J. BARRON ITRAP RD., UNIT # 2-C	Delete	NAME STRE		Str 26 Des	other, J. 1 Sandt Hin, FL	Barron rup Rd, 3254	lunit	Change 1 - C Direc	□ Addition	CR2	
TITLE	श	71 <u>171</u> -7	Delete	TITLE		٠٠.		-	⊒۔ حید	Change .	☐ Addition		
NAME STREET ADDRESS CITY-ST-ZIP		on, Jere A Ascocita Shores Dr. DX 77346		•	ET ADDRESS ST-ZIP	1)i rector						
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		- 1					Change	☐ Addilion		
12. I hereby of indicated of the cor-	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 truetee 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 gall other like empowered.												