2003 NOT-FOR-PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N06954



FILED Apr 17, 2003 8:00 am § Secretary of State 04-17-2003 90157 015 ***122.50

| THE LANDINGS AT LAKE CAROLINE I, INC. | | | | | | | 1. 2 00 2 3010. 010 | | |
|--|--|----------------------|---|------------|--|---|-----------------------------------|----------|------------|
| Principal Place ROWLETT. BRY 833 HARRISON PANAMA CITY US | AVENUE | ROWLE 833 HA | Mailing Address ROWLETT, BRYANT, W. 833 HARRISON AVENUE PANAMA CITY FL 32401 US | | | | | | |
| 2. Principal Place of Business | | 3. Ma | 3. Mailing Address | | | | | | |
| Suite, Apt. #, etc. | | Su | Suite, Apt. #, etc. | | | ☐ CHECK HERE IF MAKING CHANGES | | | |
| City & Star | te | Ci | City & State | | | 4. FEI Number 59-2760521 Applied For Not Applied be | | | |
| Zip | Country | Zij | p | Cou | ıntry | 5. Certificate of Stat | us Desired | B.75 Add | ditional |
| | 6. Name and Address of Curre | nt Registere | ed Agent | <u></u> | | 7. Name and Addre | ss of New Registered Ag | | |
| | | | | | Name | | | | |
| BRYANT, ROWLETT W. 833 HARRISON AVENUE | | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| PANAMA | CITY FL 32401 | | | | | | | | |
| | | | | | City | | FL | Zip Cod | e |
| SIGNATURE | Signature, typed or printed name of registered age | ent and title if app | 9. Election Car | mpaign F | ~ ~ | ad when reinstating) \$5.00 May Be | DATE Make Check F | Payable | to |
| | 7 10 10 10 10 10 10 10 10 10 10 10 10 10 | | Trust Fund (| Contributi | on. \square | Added to Fees | Florida Departm | ent of S | State |
| 10. | OFFICERS AND I | DIRECTORS | | 11. | | ADDITIONS/CHANGES | TO OFFICERS AND DIRE | CTORS IN | 10 |
| NAME | PC) MCNEAL, DEBRA 902 JEREMY LANE PANAMA CITY FL 32405 | | ☐ Delete | | | | | ☐ Change | ☐ Addition |
| | SDV BRYANT, ROWLETT W. 833 HARISSON AVENUE PANAMA CITY FL | | ☐ Delete | • | | ्र अक्ष्य २००१ - १००५ १० ५० | | _ Change | Addition |
| TITLE NAME | D BRYANT, ROWLETT W B-8, 1325 W. 12TH ST PANAMA CITY FL 32401 | | ☐ Delete | | L. | | | Change | ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | □ Delete | | ſ | | Г |] Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | • | | | C |] Change | ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | | | | Г | Change | ☐ Addition |

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:

Which is 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.

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