2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # NO8173 1. Entity Name					Secretary of State				
SHARPES FERRY HOME OWNERS, INC.					07-10-2	2001 90561 041	****61.25		
Principal Place of Business Mailing Address									
9901 SE HIGHWAY 314 BOX 131 SILVER SPRINGS FL 34488 US		9901 SE HIGHWAY 314 BOX 131 SILVER SPRINGS FL 34488 US							
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 59-2765517 Applied For Not Applicable				
- Zip Country		Zip	Country		5. Certificate of Status Desired \$8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name					
MAYHUGH; JANET M 9901 S.E. HWY 314 BOX 131			Į.	Address (P	(P.O. Box Number is Not Acceptable)				
BOX 131 SILVER SPRINGS F	_ 34488	City			FL Zip Code				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees Make Check Payable to Department of State									
STREET ADDRESS 9901 SE	H, MICKEY HWY 314, BOX 131 SPRINGS FL 34488	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		SAME		☐ Change	☐ Addition	
STREET ADDRESS 9901 SW	UGH, THOMAS HWY 314 BOX 141 SPRINGS FL 34488	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	490 5/Lv	JERRY CI I SE HWY ER SPRING	OLE M AN 314 BOX 15 S, FL 344	Change 6 488	Addition	
-STREET ADDRESS -9901. SE	NS, CONNIE HWY-314:BOX:166: PRINGS FL 34488	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		NOT AN		Change	Addition	
STREET ADDRESS 9901 SE	H, JANET HWY 314, BOX 131 SPRINGS FL 34488	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		SAME		☐ Change	Addition	
	OBERT HWY 314, BOX 152 SPRINGS FL 34488	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ₉₉ SiL	CHARLES OI SE HWY YER SPRIN	BLUE 314 BOX 95, FL 34	AT Change 172 488	☐ Addition	
TITLE D SINGLET STREET ADDRESS CITY-ST-ZIP SILVER \$	ON, NOREEN HWY 314 BOX 124 SPRINGS FL 34488	☐ Delete .	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D + 99 S,L	OUT MAT OI SE HUY VER SPRIN	HEWS 134 BOX 1 197, FL 3	DY Change 135 34488	Addition	

12. Thereby certify that the information supplied with his 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:

Sometrum wyhingles JANET MAYHUGH 7/6/01