DOCUMENT # N11568

1. Entity Name

SEBRING GOLF VIEW HOME OWNERS' ASSOCIATION, INC.

FILED
Jan 08, 2001 8:00 am
Secretary of State
01-08-2001 90063 018 ****61.25

Principal Place of Business	Mailing Address
C/O BRUCE LYBARGER P.O. BOX 1102 SEBRING FL 33871-8102	C/O BRUCE LYBARGER P.O. BOX 1102 SEBRING FL 33871-8102

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2777166 ☐ Applied For ☐ Not Applicable

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
LYBARGER, BRUCE J. 300 N. CIRCLE SEBRING FL 33870	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ALLBRITTON, WILLIAM 2702 ORANGE GROVE DRIVE SEBRING FL 33870	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	1185 US 27 S.	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD LYBARGER, BRUCE J. 300 N. CIRCLE SEBRING FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D OTTERMAN, JAMES 4427 SELAH RD SEBRING FL 33870	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~PD~~ ~~WILLIAM~~ BARRETT, JR	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WILLIAM BARRETT, JR 1177 US 27 S. SEBRING FL 33870	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD LELAND STILES 1193 US 27 S. SEBRING, FL 33870	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: Bruce J. Lybarger BRUCE J. LYBARGER 1/03/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #