2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 16, 2001 8:00 am [§] Secretary of State DOCUMENT # N12648 1. Entity Name 1300 LIVE OAK PLANTATION PROPERTY OWNERS ASSOCIA 03-16-2001 90005 041 ****61.25 Principal Place of Business Mailing Address 1406 MILLSTREAM 1406 MILLSTREAM DAMMALTA TALLAHASSEE FL 32312 TALLAHASSEE FL 32312 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2958166 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) DARIOTIS, TERRENCE T 1406 MILLSTREAM TALLAHASSEE FL 32312 City 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. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE PD. Change Addition Delete TITLE NAME MICA, DAVID F NAME STREET ADDRESS 1262 MILLSTREAM STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32312 VD ☐ Delete ☐ Change ☐ Addition TITLE TITLE -THOMAS, JOHN C III NAME NAME STREET ADDRESS 1430 MILLSTREAM STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32312 TITLE ☐ Delete TITLE ☐ Change Addition NAME DARIOTIS, TERRENCE T NAME STREET ADDRESS 1406 MILLSTREAM STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32312 Change TITLE ☐ Addition TITLE ☐ Delete MILLER, RANDALL P NAME NAME STREET ADDRESS STREET ADDRESS 1334 MILLSTREAM CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 33312 Delete Change ☐ Addition TITLE DOBERT, EARL W NAME NAME STREET ADDRESS STREET ADDRESS 1503 MILLSTREAM CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32312 TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADORESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

MENTS (TETTERCE T. Duriotis - Treasurer) SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

850) 523 - 9300