2001 UNIFORM BUSINESS REPORT (UBR)

Apr 23, 2001 8:00 am & Secretary of State DOCUMENT # N19556 " 04-23-2001 90145 020 ****70.00 SANDPIPER GOLF & COUNTRY CLUB PROPERTY OWNER'S A Principal Place of Business Mailing Address 5883 MALLARD DR 5883 MALLARD DR LAKELAND FL 33809 LAKELAND FL 33809 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 Applied For 59-2847260 Not Applicable Zip 7in 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) HOLLEN, JAMES 6043 CONDOR LAKELAND FL 33809 Zip Code FL 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) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$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 ☐ Delete TITLE ☐ Addition NAME HOLLEN, JAMES R NAME STREET ADDRESS STREET ADDRESS 6043 CONDOR CITY-ST-ZIP CITY-ST-ZIP <u>Lakeland Fl 33809</u> TITLE SD Delete TITLE ☐ Change XI Addition E.C."WALLY" Wahlbrink LOVE, ELIZABETH NAME NAME 6214 Egret Dn STREET ADDRESS STREET ADDRESS 6051: CONDOR DR ---CITY-ST-ZIP CITY-ST-ZIP LakeLand FL 33809 LAKELAND FL TITLE Delete TITLE Change Addition William HARKINS NAME BARAN, EDWARD M NAME 6078 Sand PiPer'S DR STREET ADDRESS STREET ADDRESS 6062 SWALLOW DR CITY-ST-ZIP CITY-ST-ZIP LakeLand FL 33809 LAKELAND FL TITLE Delete Change ☐ Addition NAME OSBORNE, JAMES P STREET ADDRESS 5717 MALLARD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u>Lakeland FL</u> 33809 TITLE ☐ Delete ☐ Change ☐ Addition HOCKERT, PHIL NAME NAME STREET ADDRESS STREET ADDRESS 6152 SWALLOW DR CITY-ST-ZIP CITY-ST-ZIP <u>Lakeland</u> FL 33809 TITLE Delete TITI F ☐ Change **Addition** David Legere BANSBACH, GLEN NAME NAME 6271 PEACOCK RUN STREET ADDRESS 1053 CARACARA CR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Lakeland FL 33809 <u>Lakeland FL 33809</u>

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. 4-11-2001 (863)859-076

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