2001 UNIFORM BUSINESS REPORT (UBR)

Jul 19, 2001 8:00 am DOCUMENT # N21467 **Secretary of State** 1. Entity Name 07-19-2001 90236 038 ****70.00 PINELLAS VILLAGE, INC. Principal Place of Business Mailing Address 8384 BAYOU BOARDWALK 8384 BAYOU BOARDWALK MANAGOTA LARGO FL 33777 LARGO FL 33777 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2850760 Not Applicable \$8.75 Additional Country 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) HUFFER, JEFFREY L. 8384 BAYOU BOARDWALK **LARGO FL 33777** City 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: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State After September 12, 2001, min. will be \$236.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Addition TITLE TITLE ☐ Delete RUPPEL, DENNIS NAME NAME Wiser, Mary 205-BAYSIDE-DR. STREET ADDRESS STREET ADDRESS 8747 Glen Lakes Blvd. N. CITY-ST-ZIP **CLEARWATER FL** CITY-ST-7IP St. Petersburg, FL 33702 Thange ☐ Addition TITLE ☐ Delete TITLE STEPHENSON: MOLLY NAME NAME Hager, Robert 1945-PALMETTO STREET STREET ADDRESS STREET ADDRESS 12030 74th Avenue North CITY-ST-ZIP **CLEARWATER-F**L CITY-ST-ZIP Seminole, FL 33772 TSD----- Lawer TITLE ☐ Change Addition TITLE Delete HOLLIS, DAVID NAME NAME 2363 GULF TO BAY BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **CLEARWATER FL 33765** CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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 embowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapted with a paddress withhell that I was monwered.

h an addr SIGNATURE:

changed, or on an atta

CR2E037 (5/01,

FILED