2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 19, 2001 8:00 am³ Secretary of State **DOCUMENT # N33459** 1. Entity Name SUGAR CREEK VILLAS ASSOCIATION, INC. 03-19-2001 90467 042 ****61 25 Principal Place of Business Mailing Address 5899 WHITFIELD AVE 5899 WHITFIELD #107 SARASOTA FL 34243 SARASOTA FL 34243 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 Applied For 4. FEI Number 65-0145570 Not Applicable Zip Country Zip 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) ADVANCED MANAGEMENT. INC **5899 WHITFIELD AVE** STE #107 Zip Code SARASOTA FL 34243 FL8. 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 9. Election Campaign Financing FILE NOW: \$5.00 May Be Make Check Payable to Trust Fund Contribution. **FEE IS \$61.25** Added to Fees **Department of State** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10.~ 11. Delete X Addition TIT! F TITI F Change DEAN F. MCDONKO MOORE, THOMAS NAME NAME 3333 26TH AVE E V-5 3333 26TH AVE E V-23 STREET ADDRESS STREET ADDRESS BRADENTON, FL 34208 CITY-ST-ZIP **BRADENTON FL 34208** CITY-ST-ZIP VD Delete Addition X TITLE TITLE Change CHARLES B. SANDWAY 3333-26TH AVE E V-13 **BRIGTS, GORDON** NAME NAME STREET ADDRESS 3333 26TH AVE E V-32 STREET ADDRESS City-St-7IP **BRADENTON FL 34208** CITY-ST-ZIP BRADENTON. PO STD ☐ Addition **Change** ☐ Delete TITLE ANDERSON, RICHARD N NAME STREET ADDRESS 3333 26TH AVE. E. V3 STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34208** CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP

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 pustee 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 wit

SIGNATURE: