2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 13, 2001 8:00 am ⁸ Secretary of State **DOCUMENT # N33874** 1. Entity Name BRIARWOOD AT SUNTREE ASSOCIATION, INC. 03-13-2001 90063 010 ****61.25 Principal Place of Business Mailing Address 6939 N. WICKHAM ROAD 6939 N. WICKHAM ROAD MELBOURNE FL 32940 MELBOURNE FL 32940 930341 HS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2952057 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) STEWART, FRANCIS 6939 N. WICKHAM ROAD **MELBOURNE FL 32940** City 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) FILE NOW: 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be П Trust Fund Contribution. Added to Fees **Department of State** FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PΠ ☐ Addition TITLE TITLE Change Change Delete HEMPHILL, CONRAD ETER CERLINI NAME NAME OBKWOOD CIRCLE STREET ADDRESS 843 OAKWOOD DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MELBOURNE FL 32940** MELBOURNE TITLE Change ☐ Addition TITLE ☐ Delete FREUD DONALD FREUNO DONAL NAME NAME 871 OAKWOOD DR STREET ADDRESS STREET ADDRESS MELBOURNE FL CITY-ST-ZIP CITY-ST-ZIP SD. TITLE ☐ Delete TITLE Change Addition HALLOCK, SHARON NAME NAME 883 OAKWOOD DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MELBOURNE FL 32940 CITY-ST-ZIP Change TITLE Delete TITLE ☐ Addition DOUGLOS BENNETT 837 OBKWOOD PRIVE SMITH, BRYAN NAME NAME STREET ADDRESS 872 OAKWOOD DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MELBOURNE FL 32940** MENBOYRUE FL 32940 Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 eath; 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

321-242-9732

changed, or on an attachment with an address, with all other like empowered.