2002 UNIFORM BUSINESS REPORT (UBR) FILED Feb 20, 2002 8:00 am Secretary of State **DOCUMENT # N35426** TOWERWOOD HOMEOWNERS ASSN., INC. 02-20-2002 90008 012 ****61.25 Principal Place of Business Mailing Address 2700 N US HWY 27 2700-N-US HWY-27 **LOT 243** 401-343 80028040 LAKE WALES FL 98853 LAKE WALES FL 33853 US 2. Principal Place of Business Mailing Address 595 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2982615 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 33859 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FRANCES M. STURGEON ~ ~ ~ 2700 NORTH US:HIGHWAY=273 LAKE WALES FL 33059 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 2 K Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. **Department of State** Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE TITLE elete KONBRACKE, CAPHERINE J NAME NAME 2700 N US AWY 27 LOT 243 STREET ADDRESS STREET ADDRESS LAKE WALES FL 33853 CITY-ST-ZIP CITY-ST-ZIP SD/ ☐ Addition ☐ Delete TITLE Change TITLE HARTER, GLENN NAME NAME STREET ADDRESS 2700 N US 27 LOT 056 STREET ADDRESS CITY-ST-7IP LAKE WALES FL 33853 CITY-ST-ZIP Change ☐ Addition TITLE TITLE MCCUTCHEN JAMES NAME NAME 2700 N US 27 LOT 249 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP LAKE WALES FL 33853 ☐ Addition Change TITLE TITLE LENGUEL, JOHN J. NAME NAME 2700 N US HWY 27 LOT 116 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE WALES FL 33853 CITY-ST-ZIP

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.

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

PD

NAME STREET ADDRESS

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STURGEON, FRAN

SYKES, CHAPLES

2700 N US 27 LOT 121

LAKE WALES FL 33853

2700 N US/27 LOT 121

LAKE WAKES FL 33853

☐ Delete

☐ Addition

☐ Addition