2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 22, 2000 8:00 am DOCUMENT # N 37025 Secretary of State 1. Entity Name 03-22-2000 90016 043 ****61.25 Parkwood V Homeowhers F 3612 NW 5946 St 13412 NW 5945 Coconut areel, A Coconut Creek, FL 33073 US. B0042858 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired 33097-*0*635 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Ian Dinaman NW 594h St 3612 Coconet Creek, FL 33073 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 9. Election Campaign Financing FILE NOW: Make Check Payable to \$5.00 May Be , 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. Siebler, John 3862 NW 59th St Delete TITLE Change Addition TITLE NAME NAME 3600 NW 58 STREET ADDRESS STREET ADDRESS oconut Creek Coconut Creck FL CITY-ST-7IP CITY-ST-ZIP TITLE Delete TITLE ☐ Change X Addition Jatalie Golbitz Fauver, Michael NAME NAME 3740 NW 584 ST 3691 NW 584654 STREET ADDRESS STREET ADDRESS SCONLET Creek FI oconit-creek. FI CITY-ST-ZIP-TITLE Delete TITLE ☐ Change **X** Addition Dingman, alan 3612 NW 59th 5 3892 NW 59th St. Coconut (reals " NAME NAME STREET ADDRESS STREET ADDRESS oconut C CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TIFLE Juan Perez Cappiello, Mitchell NAME 3910 NW 584h St. 3822 NW 59+1St Cocoput Creek, STREET ADDRESS STREET ADDRESS CITY-ST-ZIP conut Creek, FL CITY-ST-ZIP Delete TITLE Change X Addition TITLE 5D brian Oldornell NAME NAME 3671 NW 58457 STREET ADDRESS STREET ADDRESS sconut Creek CITY-ST-ZIP CITY-ST-7IP Coconut (reek, Fi Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-71P 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.

Smith, Treasurer

SIGNATURE: