FILE NOW: FILING FEE IS \$61.25

FILED Mar 18 1998 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # N39296 (1) FIG TREE VILLAGE HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 12000 NW HARBOUR RIDGE BLVD 1200 NW HARBOUR RIDGE BLVD 3. Date Incorporated or Qualified PALM CITY FL 34990 PALM CITY FL 34990 07/23/1990 4. FEI Number Applied For 65-0208480 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 22 27 City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No 23 28 Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name NEARY, MICHAEL E 82 Street Address (P.O. Box Number is Not Acceptable) 12600 NW HARBOUR RIDGE BLVD 63 PALM CITY FL 34990 84 City Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE (NOTE: Registered Agent alguature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1 1 TITLE CROSS, RICHARD NAME 12 NAME 13021 HARBOUR RIDGE BLVD. STREET ADDRESS 1.3 STREET ADDRESS PALM CITY FL CITY-ST-ZWP 1.4 CITY-ST-ZIP DELETÉ DP Change Addition TITLE 2.1 TITLE DST NAME LAUDON, DENNIS W 2.2 NAME STREET ADDRESS 13010 HARBOUR RIDGE BLVD 2.8 STREET ADDRESS CITY-ST-ZIP PALM CITY FL 2.4 CITY-ST-ZIP **K** Addition **DELETE** TITLE 3.1 TITLE William S, John C. 1861 Hanbour Ridge Blyd SHUTER, PAMELA 3.2 NAME NAME 13017 HARBOUR RIDGE BLVD STREET ADDRESS 3.3 STREET ADDRESS PALM CITY FL Pelm City FL 34890 CITY-ST-ZIP 3.4. CITY - ST- ZIP Change TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE 6.1 TITLE Addition TITLE

14. 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 annual report or supplemental annual 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 recolver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an activate. SIGNATURE:

NAME STREET ADDRESS

CITY-ST-ZIP

62 NAME

6.9 STREET ADDRESS 6.4 CITY - ST - ZIP