2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N41188

FILED
Jul 26, 2000 8:00 am
Secretary of State
07-26-2000 90011 037 ****61.25

1. Entity Name

ANASTASIA ISLAND RESORT, INC.

Principal Place of Business	Mailing Address
P O BOX 840037 ST AUGUSTINE FL 32084-0037 US	P O BOX 840037 ST AUGUSTINE FL 32084-0037 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4825 A1A South	4825 A1A South
Suite, Apt. #, etc.: #10	Suite, Apt. #, etc.: #10
City & State: St. Augustine, FL	City & State: St. Augustine, FL
Zip: 32080 Country: USA	Zip: 32080 Country: USA

4. FEI Number: 59-3044098 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WYTIAZ, JOSEPH L
4825 A1A SOUTH
ST AUGUSTINE FL 32084

7. Name and Address of New Registered Agent

Name: Alton Bradley
Street Address (P.O. Box Number is Not Acceptable): 4825 A1A South #10
City: St. Augustine **FL** Zip Code: 32080

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: Alton Bradley ALTON J. BRADLEY 7/19/2000
Signature, type or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
After September 13, 2000 min. will be $236.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPT WYTIAZ, JOSEPH L. 4825 A1A SOUTH ST AUGUSTINE FL 32084	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Carl DeProspo 4825 A1A South #27 St. Augustine FL 32080	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOWIE, DOUG 103 SHADY GLEN DRIVE BLUFTON SC 29910	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Charles Lampard 4825 A1A South #21 St. Augustine, FL 32080	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WYTIAZ, MICHAEL 4825 A1A SOUTH ST AUGUSTINE FL 32084	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Alton Bradley 4825 A1A South #10 St. Augustine, FL 32080	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Vivian Lampard 4825 A1A South #21 St. Augustine, FL 32080	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Rose Plungin 4825 A1A South #49 St. Augustine, FL 32080	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Florence Ray 4825 A1A South #30 St. Augustine, FL 32080	☐ Change ☑ Addition

CR2E037 (5/00)

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.

SIGNATURE: ALTON J. BRADLEY 7/19/2000 904-471-5167
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #