2002 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # N41757** 1. Entity Name PARADISE PINES HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 2141 SW. 120TH TERR 2141 SW 120TH TERR DAVIE FL 33325 DAVIE FL 33325

FILED May 12, 2002 8:00 am § Secretary of State

05-12-2002 90550 008 ****61.25

2. Principal Place of Business 12-025 SW 32 nd COURT (2-025 SW 32 nd COURT Suite, Apt. #, etc.					DO NOT WRITE IN THIS SPACE					
DAVIE, FL DAVIE, FL			_		. FEI Number	65-0745289			opplied For lot Applicable	Ţ
3332	S USA	33325	Country	5.	Certificate of	Status Desired		8.75 Ac	ditional	1
	6. Name and Address of Current	Registered Agent	VOIT	7.	Name and A	ddress of New Re				┧
633 SOUT EIGHTH F	HARVEY K TH FEDERAL HIGHWAY CLOOR JDERDALE FL 33301	Street Ad	Street Address (P.O. Box Number is Not Acceptable)							
The above named entity submits this statement for the purpose of changing its registere				registered a	gent, or both.	in the state of Flor	FL ida.			┨
SIGNATURE			egistered Agent signature	e required when		Mak	DATE Se Check Fepartment	Payable of State	to e	
10.	OFFICERS AND DIR	ECTORS	11.	ADDI	TIONS/CHAN	ES TO OFFICER	S AND DIREC	CTORS IN	J 10	4
NAME STREET ADDRESS CITY-ST-ZIP	CHICCONE, MICHAEL 2141 SW 120TH TERR. DAVIE FL 33325	☐ Delete	NAME STREET ADDRESS	OP JOHN 1202 DAVII	KEL S SW	1.Y ,	OURT	Change	Addition	20E007 (0(04)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MCINTYRE, LESTER 11950 SW 22ND CT DAVIE FL 33325	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2430 2430 2AV(8	X BRI SW I	4VER.MA 1945 TR 3332	HN ERRAC S		☐ Addition	[
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SCHMIDT, MARK 11920 SW 22ND CT DAVIE FL 33325 DS	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ORE 2221 DAVIS	TE P SW	ECK 120th T8 1 3332	errac 25	Change C	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CARO, DEBRA 12010 SW 23RD CT WESTON FL 33327	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP	75 DEBR 12010 DAVI E	A CAR SW ELEL	22 nd (oupt 25	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	£5	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			19		Change	☐ Addition	
of the corp	ertify that the information supplied with the on this report or supplemental report is to coration or the receiver or trustee empower on an attachment with an address, wi	reced to execute this report as r	e exemption stated ignature shall have equired by Chapte	in Section e the same er 617, Flori	119.07(3)(i), F legal effect as da Statutes; a	lorida Statutes. I fu if made under oat nd that my name a	urther certify th; that I am a appears in Bl	hat the in an officer ock 10 or	formation or director Block 11 if	i i

REQUIRENCE 4/23/02 254-215-038/