2001 UNIFORM BUSINESS REPORT (UBR) FILED Jan 12, 2001 8:00 am Secretary of State **DOCUMENT # N42850** 1. Entity Name STEINHATCHEE LANDING OWNERS ASSOCIATION, INC. 01-12-2001 90018 029 ****61.25 Principal Place of Business Mailing Address BOX 789 **BOX 789** LUUUUJIAA STEINHATCHEE FL 32359 STEINHATCHEE FL 32359 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-3111109 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required: -7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) FOWLER, R. DEAN 1604 3RD AVE STEINHATCHEE FL 32359 Zip Code City 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Added to Fees Department of State Trust Fund Contribution. FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. OFFICERS AND DIRECTORS 11. 10. (10/00) X Addition ☐ Change ☐ Delete TITLE TITLE frances emmy FOWLER, R. DEAN NAME NAME OVERLOOK DA PIF STREET ADDRESS 3R2E037 1604 3RD AVE STREET ADDRESS 31063 MONTEZUMA, SA CITY-ST-ZIP STEINHATCHEE FL CITY-ST-ZIP ☐ Change Addition SALTER X Delete TITLE STIG NW ATTH ST MOORE, LEN NAME NAME STREET ADDRESS 1327 BESSENT RD STREET ADDRESS らみばはらいににもってに ろこららろ CITY-ST-ZIP CITY-ST-ZIP STARKE FL 32091 Change Addition Addition GEORGE TSOCHIS Delete TITLE S. FLORIDA AVE. DALE, HARRY NAME NAME 5015 STREET ADDRESS 2420 MADISON DR STREET ADDRESS LAKELAND, FL 33807 CITY-ST-ZIP VALDOSTA GA 31794 CITY-ST-ZIP JODIG PARNELL ☐ Change 🔀 Addition Delete TITLE TITLE 1844 SE 1346 ST MILES, PAT NAME NAME STREET ADDRESS 4937 WATER VISTA DR STREET ADDRESS OCALA, FL 34471 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32821 Change ☐ Addition TITLE Delete TITLE PLYMEL, STEVE NAME NAME STREET ADDRESS 2212 S SHERWOOD DR STREET ADDRESS CITY-ST-7IP VALDOSTA GA 31602 CITY-ST-ZIP ☐ Change ☐ Addition 🗘 Delete TITLE TITLE CHAPMAN, GENE NAME NAME STREET ADDRESS STREET ADDRESS PO BOX 759 CITY-ST-ZIP CITY-ST-ZIP STEINHATCHEE FL 32359

12. I hereby certify that the information supplied with this filling 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

SIGNATURE:

R. DEAN Fowler 1/5/01 352.498-5678

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