2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N43194

FILED Sep 18, 2002 Secretary of State

Entity Name: SWEETWATER AND CONCERNED CITIZENS COMMUNITY ASSOCIATION INC.

Current P	rincipal Place	of Business:	New Principal Plac	ce of Business:
	SON BLVD IVILLE, FL 322	210		
Current N	lailing Addres	s:	New Mailing Addre	ess:
	THEW STREE IVILLE, FL 322			
FEI Number	: 59-3135430	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Address	s of New Registered Agent:
	MILL PL N IVILLE, FL 322			
			nurnosa of changing its regista	red office or registered agent, or both,
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registe	rea amoc at registered agent, or both,
in the Stat	e of Florida.	submits this statement for the	purpose of changing its registe	rea office of registered agent, or both,
	e of Florida. ´ RE:	ic Signature of Registered Ag		Date
in the Stat	e of Florida. ´ RE:	ic Signature of Registered Ag	ent	
in the Stati SIGNATU OFFICER Title: Name: Address:	e of Florida. RE: Electror S AND DIREC	nic Signature of Registered Ag TORS: Delete RTIS V ST.	ent	Date
in the Stat	e of Florida. RE: Electror S AND DIREC PD () JOHNSON, CUI 7176 MATTHEV JACKSONVILLE	ric Signature of Registered Ag TORS: Delete RTIS V ST. E, FL 32210 Delete Y R REET	ent ADDITIONS/CHAN Title: Name: Address:	Date GES TO OFFICERS AND DIRECTORS
in the Stati SIGNATU OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida. RE: Electror S AND DIREC PD () JOHNSON, CUI 7176 MATTHEV JACKSONVILLI VD () GEORGE, RUB 7034 LUKE STI JACKSONVILLI	TORS: Delete RTIS V ST. E, FL 32210 Delete REET E, FL 32210	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address:	Date GES TO OFFICERS AND DIRECTORS () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GENELL M. MILLS TD 09/18/2002