2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N43684

1. Entity Name

LATITUDE 29 RENTAL ASSOCIATION, INC.



FILED Apr 29, 2003 8:00 am Secretary of State
04-29-2003 90059 014 ****61.25

Suite. Apil #. etc. CHECK HERE IF MAKING CHANGES City & State City & State A. FEI Number 59-3075841 Applied for Not Application of Country State A. FEI Number 59-3075841 Applied for Not Application of Country State A. FEI Number 59-3075841 Applied for Not Application of Country State A. FEI Number 59-3075841 Applied for Not Application of Country State Applied for Not Application of Country State Applied for Not Applied of State Applied for Not Applied for Not Applied State Applied for Not Applied for Not Applied State Applied for Not Applied for Not Applied State Applie	1703 FRONT E	ce of Business BEACH ROAD BEACH FL 32413-3319	Mailing Address 21703 FRONT BEACH ROAD PANAMA CITY BEACH FL 32				i (BRAIKA) RAI BIR		.* Fa Isa ni a iasi	ALBIN SERNI ANI	tin 1511 511	
City & State Country Country Country See Required For	2. Principal F	Place of Business	3. Mailing Address									
Some and Address of Current Registered Agent. S. Certificate of Status Desired S8.75 Additional Fee Required	Suite, Apt.	#, etc.	Suite, Apt. #, etc.				. CHECK HERE IF MAKING CHANGES					
Country Zip Country Zip Country S. Certificate of Status Desired S8.75 Additional Fee Required	City & Stat	te	City & State			4.	4. FEI Number 59-3075841					
Sevent Address of New Registered Agent Name and Address of New Registered Agent	Zip Country		Zip		Country		5. Certificate of Status Desired			\$8.75 Additional		
Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 6. The above named entity submitights statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. I am familiar with, and accept mide poligiations of registered agent, or both, in the State of Florida. I am familiar with, and accept mide poligiation of registered agent, or both, in the State of Florida. I am familiar with, and accept mide poligiation of registered agent, or both, in the State of Florida. I am familiar with, and accept mide poligiation of registered agent, or both, in the State of Florida. I am familiar with, and accept mide poligiation of registered agent, or both, in the State of Florida. I am familiar with, and accept mide poligiation of registered agent, or both, in the State of Florida. I am familiar with, and accept mide poligiation of registered agent, or both, in the State of Florida. I am familiar with, and accept mide poligiation of registered agent, or both, in the State of Florida. I am familiar with, and accept mide poligiation of registered agent, or both, in the State of Florida. I am familiar with, and accept mide poligiation of registered agent, or both, in the State of Florida. I am familiar with, and accept mide poligiation of registered agent, or both, in the State of Florida. I am familiar with, and accept mide poligiation of registered agent, or both, in the State of Florida. I am familiar with, and accept mide poligiation of registered agent, or both, in the State of Florida. I am familiar with, and accept mide poligiation of registered agent, or both, in the State of Florida. I am familiar with, and accept mide poligiation of registered agent, in the State of Florida. Interest Addition of Poligiation of registered agent, in the State of Florida. I am familiar with, and accept mide poligiation of registered agent, in the State of Florida. I am familiar with and accept mide poligiation of Florida		6. Name and Address of Current	Registered Agent.	-	·	 7	Name and Add	lress of New Re				1
21703 FRONT BEACH ROAD PANAMA CITY BCH FL 32413 City FL 21p Codo 8. The above named entity submiglights attainment for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and access the designations of registered agent, or both, in the State of Florida. I am familiar with, and access the designation of registered agent, or both, in the State of Florida. I am familiar with, and access the designation of registered agent, or both, in the State of Florida. I am familiar with, and access the designation of registered agent, or both, in the State of Florida. I am familiar with, and access the designation of registered agent, or both, in the State of Florida. I am familiar with, and access the state of Florida Designation of registered agent, or both, in the State of Florida. I am familiar with, and access the state of Florida Designation of registered agent, or both, in the State of Florida. I am familiar with, and access the state of Florida Designation of registered agent, or both, in the State of Florida. I am familiar with, and access the state of Florida Designation of registered agent, or both, in the State of Florida. I am familiar with, and access the state of Florida Designation of registered agent, or both, in the State of Florida. I am familiar with, and access the familiar with and access t				Name								
Election Campaign Financing Trust Fund Contr Bullon Trust Fund Contr				Street Address			(P.O. Box Number is Not Acceptable)					
B. The above named entity submidshib statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and access the color of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and access the color of the color of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and access the color of the color of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and access the color of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and access the color of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and access the color of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and access the color of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and access the color of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and access the color of the purpose of the pur	Panama	CITY BCH FL 32413						•				
SIGNATURE Signature, speed of printed native of registered agent and time if applicable. FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. ADDITIONS/CHANGES TO CFFICERS AND DIRECTORS					City			c	FL	Zip Co	de	1
TITLE NAME HOLT, BOB STREET ADDRESS RIFEET ADDRESS	SIGNATURE	Signature, typed or printed name of registered agent a	9. Election Carr	npaign Fi	nancing	\$5.	.00 May Be		ke Check			
TITLE NAME HOLT, BOB STREET ADDRESS RISTERET ADDRESS RISTERET ADDRESS RISTERET ADDRESS RISTERET ADDRESS RISTERET ADDRESS RAMAGE, ANDY STREET ADDRESS RISTERET A	10	OFFICERS AND DIE	PECTORS	T 11		VDD:	TIONIS /CHANIC	בפ דה הבכורבם	e AND DIE	ECTOPS II	N 10	4
DAVID, ALAN 480 IRONWOOD CIR CITY-ST-ZIP CROSSVILLE TN 38571 TITLE RAMAGE, ANDY 417-A DOGWOOD LN TUSCALOOSA AL 35405 TUSCALOOSA AL 35405 TUSCALOOSA AL 35405 TUSCALOOSA AL 35124 TITLE RAMAGE, ANDY ANAE CHAFIN, LARRY Delete TITLE CHAFIN, LARRY Delete TITLE RAMAGE, ANDY Additive CHAFIN, LARRY Delete TITLE RAMAGE, ANDY ANAE CITY-ST-ZIP Delete TUSCALOOSA AL 35405	TITLE NAME STREET ADDRESS	P HOLT, BOB 1811 SAGEWAY	<u></u>	TITLE NAME STREE	T ADDRESS	LAREL	1 ARNO	ld bud De			Addition	(20/05)
TITLE NAME RAMAGE, ANDY 417-A DOGWOOD LN TUSCALOOSA AL 35405 TITLE D TOTALE CHAFIN, LARRY STREET ADDRESS CITY-ST-ZIP CHAFIN, LARRY CITY-ST-ZIP PELHAM AL 35124 TITLE NAME NAME RAMAGE, ANDY Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP PELHAM AL 35124 TITLE NAME NAME RAMAGE, ANDY Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TUSCALOOSA AL 35405 TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TUSCALOOSA AL 35405 TITLE NAME STREET ADDRESS	NAME STREET ADDRESS	DAVID, ALAN 480 IRONWOOD CIR	Delete	NAME STREE	T ADDRESS ST-ZIP	V 1626 1626 West	SMITH WEBB RA	SA 3183	r3	_ •	Addition	
TITLE D CHAFIN, LARRY NAME STREET ADDRESS CITY-ST-ZIP PELHAM AL 35124 TITLE D Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP RAMAGE, ANDY A17-A DOGWOOD LN CITY-ST-ZIP TUSCALOOSA AL 35405 TITLE D Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP TUSCALOOSA AL 35405 TITLE NAME STREET ADDRESS	NAME STREET ADDRESS	417-A DOGWOOD LN	Delete	NAME STREE	T ADDRESS	BETT 511 A	MAC'D Y	iel DR.	 -	Chañge	Addition	
TITLE RAMAGE, ANDY ATT-A DOGWOOD LN CITY-ST-ZIP TUSCALOOSA AL 35405 TITLE Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	NAME STREET ADDRESS	2001 CHANDABROOK DR	☐ Delete	NAME STREE		D 2002	e Aker	25 ty Rd	8 52	☐ Change	Addition	
TITLE Delete TITLE D Change XAddition NAME STREET ADDRESS STREET ADDRESS 1103 SUMMERALAKE EST.	TITLE NAME STREET ADDRESS	D RAMAGE, ANDY 417-A DOGWOOD LN	☐ Delete	NAME STREE	- 1	TAM6 8132	S SHE	PHERE CEK C			Addition	1
CITY-ST-ZIP ST. Louis Mo 63026	TITLE NAME		□ Delete	NAME STREE		D Ken:	Schopp Summer	olake	E34.		Addition	

of the exemption statutes, information supplied with this limit does not qualify for the exemption stated in Section 119.07(3)(1), 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: