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

Mar 19, 2003 8:00 am Secretary of State **DOCUMENT # N44125** 1. Entity Name 03-19-2003 90161 003 ****61 25 HERON OAKS OWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address % AMELIA ISLAND COMPANY % AMELIA ISLAND COMPANY AMELIA ISLAND PLANTATION AMELIA ISLAND PLANTATION AMELIA ISLAND FL 32034 AMELIA ISLAND FL 32034 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State 4. FEI Number 59-3163676 City & State Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent AMELIA ISLAND MANAGEMENT Street Address (P.O. Box Number is Not Acceptable) 3000 FIRST COAST HWY AMELIA ISLAND FL 32034 City Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. STD TITLE TITLE ☐ Delete ☐ Change ☐ Addition CONNOLLY, ANNE NAME NAME STREET ADDRESS 23 HERON OAKS COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AMELIA ISLAND FL 32034 ☐ Delete TITLE TITLE PDy y fhange ☐ Addition **ELLIS. ROBERT** NAME NAME STREET ADDRESS **18 HERON OAKS COURT** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FERNANDINA BEACH FL 32034 ☐ Addition TITLE TITLE ☐ Change X X X Delete MOSER, WILLIAM NAME NAME STREET ADDRESS STREET ADDRESS 4 HERON OAKS COURT . CITY-ST-ZIP CITY-ST-7IP AMELIA ISLAND FL 32034 PD XIXI Kelete TITLE ☐ Change X Addition MILLER, RICHARD NAME NAME Bornhouser, Tom STREET ADDRESS **8 HERON OAKS COURT** STREET ADDRESS 9 Heron Oaks CITY-ST-ZIP CITY-ST-ZIP amelia island FL 32034 Amelia Island, FL 32034 TITLE ☐ Delete TITLE ☐ Addition NAME STOCKER, ANNETTE NAME STREET ADDRESS **3 HERON OAKS CT** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AMELIA ISLAND FK 32034 X Xddition TITLE Delete TITLE ☐ Change NAME NAME Reece, Martin STREET ADDRESS STREET ADDRESS 2 Heron Oaks

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.

CITY-ST-ZIP

Amelia Island

SIGNATURE:

FILED