

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 **DOCUMENT # N50557**

1. Corporation Name

BAREFOOT BAY COMMUNITY FUND, INC.

| Principal Place of Business |
|--|
| 625 BAREFOOT BLVD BAREFOOT BAY FT 32976 |
| US |

2. Principal Place of Business

21

Mailing Address

2a. Mailing Address

P O BOX 779 186 BAREFOOT BAY FL 32976

26

FILED Mar 02, 1999 8:00 am § Secretary of State

03-02-1999 90189 005 ****61.25

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3. Date Incorporated or Qualifed 08/19/1992

| City & State Country 6. Election Campaign Financing Added to Fees 10. Name and Address of New Registered Agent 11. Name FRESE, GARY B. 930 S HARBOR CITY BLVD STE 505 MELBOURNE FL 32901 84 City FL 85 Zip Code 11. Pursuant to the proisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, it am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS IN 12 12. NAME O'KEEFE, MARILYN SIREET ADDRESS CITY-ST-ZIP BAREFOOT BAY FL 32906 14 CITY-ST-ZIP TITLE D CHange Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CHange Addition | Suite, Apt. #, etc. Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 4. FEI Number | - Apr | olied For | | |
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| Zip Country Zip Country Zip Country Zip Country Zip | City & Stat | e | <u> </u> | | | 5. Certificate of Status Desired | | | | |
| 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name FRESE, GARY B. 300 S HARBOR CITY BLVD STE 505 MELBOURNE FL 32901 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and a state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and a state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and a state of registered agent. I am familiar with, and accept the obligations of Section 617,0502, Florida Statutes, the above-name opporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of Section 617,0502, Florida Statutes, the above-name opporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and the provision agent and the registered of directors. I hereby accept the appointment as registered agent, and the provision agent ag | | | | Country | | 6. Election Campaign Financing | \$5.00 | May Re | | |
| 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent | 24 | 25 | 29 | 0 | 1 | | , , | | | |
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| ON THE STATE OF TH | 1 | | | | | | | | | |
| | | portific that the information according with | this filing does not qualify for the | | | Section 110 07/2)(i) Florida Statutes 14 | other certify that the in | formation | | |

indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.