2001 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # N93000003301 (9). May 03, 2001 8:00 am Secretary of State 1. Entity Name PALOMINO ESTATES HOMEOWNER'S ASSOCIATION, INC. 05-03-2001 90995 036 \*\*\*\*61.25 Mailing Address Principal Place of Business 3. Mailing Address C/O Diane Llewellyn 2. Principal Place of Business, C/O Alex Wood Suite, Apt. #, etc. 1431 Palomino Way Suite, Apt. #, etc. 1463 Palomino Way DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Oviedo, oviedo. FL  ${ t FL}$ 59-3193329 Not Applicable Country Seminole \$8.75 Additional Zip Seminole <sup>Zip</sup> 32765 5. Certificate of Status Desired 32765 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Alex Wood Street Address (P.O. Box Number is Not Acceptable) 1431 Palomino Way Oviedo, FL 32765 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. ൪ SIGNATURE DATE nature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to . 9. Election Campaign Financing \$5.00 May Be FICE NOW: Department of State -Trust Fund Contribution. -Added to Fees FEE 0S \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change ☐ Addition TITLE ☐ Delete TITLE non NAME Alex Wood NAME STREET ADDRESS 1431 Palomino Way STREET ADDRESS Φ CITY-ST-ZIP Oviedo, FL 32765 CITY-ST-7IP Change ☐ Addition ☐ Delete TITLE NAME Carol Wood/Anderson NAME STREET ADDRESS STREET ADDRESS  $\infty$ 1431 Palomino Way CITY-ST-ZIP Oviedo, FL 32765 CITY-ST-ZIP ☐ Change ☐ Addition pnq ☐ Delete SD NAME NAME ince Lisbeth Keck changes STREET ADDRESS STREET ADDRESS 1364 Palomino Way CITY-ST-ZIP CITY-ST-ZIP Oviedo, FL 32765 Change ☐ Addition ☐ Detete TITLE o cha form NAME NAME Diane Llewellyn STREET ADDRESS STREET ADDRESS 1463 Palomino Way CITY-ST-ZIP CiTY-ST-ZIP Oviedo, FL 32765 There are n preprinted Change ☐ Addition TITLE ☐ Delete NAME NAME Sandra Duda STREET ADDRESS STREET ADDRESS 1447 Palomino Way CITY-ST-ZIP CITY-ST-ZIP Oviedo, FL 32765 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS Robert LeGault STREET ADDRESS CITY-ST-ZIP 1465 Bronco Trail CITY-ST-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in 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:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFIGER OR DIRECTOR

Laura Diane Llewellyn (407) 365-3742

Treas 4/20/01

Date Daytime Phone #