2003 NOT-FOR-PROFE CORPORATION UNIFORM BUSINESS REPORT (UBR)

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Apr 28, 2003 8:00 am § Secretary of State 04-28-2003 90492 042 ****61.25

FILED

FAIRWAY OAKS, THE GREENS, AND THE RESERVE AT PEL CAN POINTE PROPERTY OWNERS ASSOCIATION, INC.					
Principal Place of Business	Mailing Address	·			

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Secretary Secr	City & Stat	e		City & State			4. FEI Number 65-0		5-0526897	─	
6. Name and Address of Current Registered Agent MCLAIN, WILLIAM ANI 889 WOODBRIDGE DRIVE VENICE FL 34283 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered effice or registered agent, or both, in the State of Florae. It am familiar with, and accept the obligations of registered and entity submits this statement for the purpose of changing its registered effice or registered agent, or both, in the State of Florae. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florae. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florae. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florae. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florae. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florae. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florae. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florae. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florae. It am familiar with, and accept the obligation of registered agent, or both, in the State of Florae. It am familiar with, and accept the obligation of registered agent, or both, in the State of Florae. It am familiar with, and accept the obligation of registered agent, or both, in the State of Florae. It am familiar with, and accept the obligation of registered agent, or both, in the State of Florae. It am familiar with, and accept the obligation of registered agent, or both, in the State of Florae. It am familiar with, and accept the obligation of registered agent, or both, in the State of Florae. It am familiar with, and accept the obligation of registered agent, or both, in the State of Florae. It am familiar with, and accept the familiar	Zip		Country	Zip	Zip Count			5. Certificate of St	\$8.75 Add	\$8.75 Additional	
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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.

SIGNATURE:

REDL, OUINN, TREAS. 4-23-03 941.496-475