2001 UNIFORM BUSINESS REPORT (UBR) FILED N 9 500000 1088 May 22, 2001 8:00 am **DOCUMENT#** 1. Entity Name Secretary of State Amelia Island ( 05-22-2001 90636 030 \*\*\*\*70.00 6800 First Coast Huy Amelia Island Fl 320 PO BOX 3000 melia Island FI 320*35* 3. Mailing Address D0056771 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59 - 3 3*85* 0 39 Not Applicable \$8.75 Additional Country Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Joseph Street Address (P.O. Box Number is Not Acceptable) 32034 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 SIGNATURE DATE Signature, 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 FILE NOW: Trust Fund Contribution.\_\_  $\Box$ Added to Fees... Department of State ---FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. CR2E037 (11/00 Change ☐ Addition TITLE ☐ Delete TITLE ck Pitler NAME NAME Cedar STREET ADDRESS Red STREET ADDRESS 32034 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE TITLE □ Delete Merman NAME Bill NAME sea Marsh STREET ADDRESS STREET ADDRESS 32034 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete ! TITLE NAME NAME Place Ocean STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Delete TITI F TITLE NAME 540 Beach Wood Road NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE JONES NAME NAME Ocean club Place STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 empower

**SIGNATURE** 

27 APRIL 2001 (904)321-5699

attachment #195000001088 Addition D0050771 Beachside Place melia Island 32034 Brannen Beach wood 32034 Speas Beach halker 32034