2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # N9700007201 Apr 25, 2000 8:00 am Secretary of State COALITION FOR RESPONSIBLE ECONLOCKHATCHEE DEVELO 04-25-2000 90062 043 ****61.25 Mailing Address Principal Place of Business PO BOX 621047 300 LAKE EVA DRIVE OVIEDO FL 32762-1047 CHULUOTA FL 32766 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-3400118 Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RICH, MICHAEL D. Street Address (P.O. Box Number is Not Acceptable) RICH, MICHAEL D 10078 CUSTER CIRCLE 300 LAKE EVA DRIVE CHULUOTA FL 32766 Zip Code 328(7 ORLANDO 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 FILE NOW: \$5.00 May Be Trust Fund Contribution. **Department of State** Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. PD ☐ Delete ☐ Addition TITLE TITLE RICH, MICHAEL NAME RICH, MICHAEL NAME 10078 CUSTER CIRCLE STREET ADDRESS STREET ADDRESS P.O. BOX 660306 ORLANDO, Pl. 32817 CITY-ST-ZIP CITY-ST-ZIP CHULUOTA FL 32766 Change ☐ Addition Delete TITLE TITLE NAME GREENBAUM, LENNARD NAME STREET ADDRESS STREET ADDRESS 1795 WILLINGHAM RD CITY-ST-ZIE CITY-ST-ZIE OVIEDO FL 32766 ☐ Delete ☐ Change Addition TITLE TITLE n NAME NAME valin, James STREET ADDRESS STREET ADDRESS 308 KIWANIS CIRCLE CITY-ST-7IF CITY-ST-ZIP CHULUOTA FL 32766 Change ☐ Addition ☐ Delete TITI F BESSETTE, MARK NAME NAME STREET ADDRESS STREET ADDRESS 240 WEST 7TH STREET CITY-ST-ZIP CITY-ST-ZIP CHULUOTA FL 32766 🔀 Delete TITLE Change ☐ Addition TITLE GROSSMAN, PATRICIA STREET ADDRESS STREET ADDRESS 1668 CANOE CREEK ROAD CITY-ST-ZIP CITY-ST-ZIP OVIEDO FL 32766 ☐ Addition TITLE ☐ Detete Change NAME NAME STREET ADDRESS STREET ADDRESS

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.

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