2000 UNIFORM BUSINESS REPORT (UBR) FILED Jan 27, 2000 8:00 am DOCUMENT # **N98000005452** 1. Entity Name Secretary of State ST. LUCIE RIVER LEGAL DEFENSE FUND, INC. 01-27-2000 90090 001 ****61.25 Principal Place of Business Mailing Address 555 COLORADO AVENUE 555 COLORADO AVENUE STUART FL 34994 STUART FL 34994-3013 LUCTOR 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0864820 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) CRARY, LAWRENCE E 555 COLORADO AVENUE STUART FL 34994 City Zip Code FI 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. जिल्हा से स्थान 2018年1年10日 10日本金田(1918年192 PERSONAL PROPERTY. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to 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 10. OFFICERS AND DIRECTORS 11. **X**Addition TITLE ☐ Delete TITLE ☐ Change GUY. WILLIAM E JR. NAME Henderson, Kevin 300 N. Colorado Avenue STREET ADDRESS STREET ADDRESS 55 EAST OCEAN BLVD. CITY-ST-ZIP CITY-ST-ZIP Stuart, FL 34994 STUART FL 34994 X Addition ☐ Delete TITLE Change TITLE MAITLAND, ROBERT N II NAME Perry, Mark NAME STREET ADDRESS 301 S.E. MacArthur Blvd. STREET ADDRESS 2081 E. OCEAN BLVD., 2ND FLOOR CITY-ST-ZIP :CITY-ST-ZIP. . STUART FL-34996-- ---Stuart, FL 34996 ☐ Delete ☐ Change Addition TITLE TITLE CRARY, LAWRENCE E III NAME NAME 555 COLORADO AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STUART FL 34994 ☐ Change ☐ Addition TITLE Delete TITLE COFFIN, CARL NAME NAME STREET ADDRESS 121 FLAGLER AVENUE STREET ADDRESS CITY-ST-ZIP STUART FL 34994 CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE

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 pusted empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver or changed, or on an attachment with

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIF

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

CRARY, EVANS JR.

STUART FL 34994

STUART FL 34994

555 COLORADO AVENUE

DEBERARD, PHILLIP E

215 S. FEDERAL HIGHWAY SUITE 300

Delete

1/20/00

Cate

(561) 287-2600

☐ Change

Addition