2001 UNIFORM BUSINESS REPORT (UBR)

Apr 30, 2001 8:00 am Secretary of State DOCUMENT # N9900001451 04-30-2001 90030 036 ****61.25 CHOCTAWHATCHEE BAYWATCH, INC. Principal Place of Business Mailing Address 3728 KESWICK CIR. 3728 KESWICK CIR. BIRMINGHAM AL 35242 BIRMINGHAM AL 35242 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City & State Applied For 63-1225970 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BRIGHTMAN, RICHARD S 123 S. CALHOUN ST. TALLAHASSEE FL 32301 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. DPST ☐ Addition CR2E037 (10/00) TITLE TITLE Change 1 ☐ Delete NAME DENNING, REBECCA NAME 21801 WHITES MECK Rd 3728 KESWICK CIR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIF **BIRMINGHAM AL 35242** CITY-ST-ZIF BUSHWOOD 20618 TITLE D۷ ☐ Delete TITLE ☐ Addition NAME DENNING, ROBERT NAME WHITES NECK Rd 21801 3728 KESWICK CIR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Bushwood **BIRMINGHAM AL 35242** MD 20618 D٧ TITLE ☐ Delete TITLE ☐ Change Addition MASSEY, R. SCOTT NAME NAMÉ STREET ADDRESS 7309 WOODRUSH CT. STREET ADDRESS CITY-ST-ZIF **ELKRIDGE MD 21075** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME

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.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS CITY-ST-71P

SIGNATURE:

KOBERT W DENNING SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR