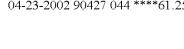
NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Jun 02, 2002 8:00 am Secretary of State

04-23-2002 90427 044 ****61.25



DOCUMENT # N 990000 1542 TERRA CEIA MANORTENANTS ASSOCIATION INC DO NOT WRITE IN THIS SPACE 3. Mailing Agdress 56|9B4XXXXPRD #-433 DO NOT WRITE IN THIS SPACE 4. FEJ Number Applied For Not Applicable Country MANATZ \$8.75 Additional Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent DO_NOT_WRITE IN THIS SPACE 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 (NOTE: Registered Agent signature required when reinstating) FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Initial or Amended UBR Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS TITLE TITLE RICHARD L. CHMPBElly 433 5619 BHYSHOYERD #433 PALINYTTO FL 34221 NAME CR2E037B (12/01 NALIE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE WALT LEGGE NAME 5619 BAY Short RD #419 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALMETTO FL 34221 CATY-ST-ZIP TITLE: JOSEPHINE HIME BAUGH NAME NAME 5619 BAYSHORE RD # 414 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DO NOT WRITE CITY-ST-7P HOURER RENE LANDRY ### TITLE TITLE IN THIS SPACE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE SLORTA SCHWEIN BERG SP19BAY SHORE RD #312 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP TITLE THE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP

12. I hereby certify that the information supplied with this filling 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 eath; 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 on an attachment with an address, with all other like empowered.