FILED

2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Apr 15, 2003 8:00 am Secretary of State P00000117804 **DOCUMENT #** 04-15-2003 90122 036 ***150.00 1. Entity Name BVH DEVELOPMENT, INC. Principal Place of Business Mailing Address 741 S. ORANGE AVE. PO BOX 3377 SARASOTA FL 34236 SARASOTA FL 34230-9998 2. Principal Place of Business 3. Mailing Address P.O. BOX <u>1840 Phillippi Shores Dr</u> 20708 Suite, Apt. #, etc CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 65-1071815 Sarasota <u>Sarasota</u> Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 34231 34<u>276</u> Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SEIDER, WILLIAM M Street Address (P.O. Box Number is Not Acceptable) 200 S ORANGE AVENUE SARASOTA FL 34236 City Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11, TITLE ☐ Delete TITLE X Change ☐ Addition MORRIS, ROBERT A JR NAME MORRIS, ROBERT A JR 1840 PHILLIPPI SHORES DR 1430 KENILWORTH ST STREET ADDRESS STREET ADDRESS SARASOTA FL 34231 CITY-ST-ZIP SARASOTA FL 34231 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME CARRION, JAIME S NAME STREET ADDRESS 3665 BEE RIDGE RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Sarasota FL 34233 TITLE - Delete - ---TITLE ----Change Taddition NAME MCSWEENEY, ANINA C NAME STREET ADDRESS 3665 BEE RIDGE RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34233 TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition

12. Thereby 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if ment with a address, with all other like empowered

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

DEQUIPERBERT SIND! UP SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MORRIS, JR