OCUMENT # P02000022945 Entity Name UWANNEE SPRINGS STATION, INC.								FILED II P		
ncipal Place of Business 888 U.S. HIGHWAY 90 VE OAK FL 32060 Principal Place of Business Suite, Apt. #, etc.			Mailing Address 8588 U.S. HIGHWAY 90 LIVE OAK FL 32060 3. Mailing Address Suite, Apt. #, etc.			03-16	SECKÉ TALLAI	TARY OF HASSEE,	STATE FLORIDA	3 00.00
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						1si	MOORE	CR2E034	(10/04)	
City & State			City & State			4. FEI Numb	01-064116	iO	J	otied For Applicable
Zip	ip Country		Zip Coun		try 5. Certificat		of Status Desired		\$8.75 Add	tional
	6. Name and	Address of Current	Registered Agent			7. Name and	Address of New	Registered A	\gent	
HATFIELD, FRED J III 8588 U.S. HIGHWAY 90					Name Street Address (P.O. Box Number is Not Acceptable)					•
LIVE	OAK FL 320)6 0			City				Zip Code	
The above the obligation	named entity submons of registered a	mits this statement k	the purpose of changing it	s registere	·	stered agent, or bo	ith, in the State of F	FL. Horida. Iam (lamiliar with,	and accep
the obligation of the college of the	Sgnature, typed or Julie Sqnature, typed or Julie BLE NOW!!!" FE May 1, 2005 Fe	agent.	and title if applicable (NO		d office or regis		9. Election Camp Trust Fund Ca	DATE	ing \$5.	and accept
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2. 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SCHATTER AND TYPE OF PARTY AND TO SHOP CHICAGO THE SHOP CONTRACTOR

Date Daytme Phone #