FILED 2003 FOR PROFIT CORPORATION Apr 28, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** P02000031763 DOCUMENT # 04-28-2003 90204 034 ***150.00 SAFE HARBOR HOMES, INC. Principal Place of Business Mailing Address 3690 CHERRY HILLS COURT 3690 CHERRY HILLS COURT GREEN COVE SPRINGS FL 32043 GREEN COVE SPRINGS FL 32043 2. Principal Place of Business 5834 Canal Mun Tenence 3. Mailing Address Boy 8489 P.0 Suite, Apt. #. etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number Flening JSWAD Oppisier Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired 3<u>2004</u> Fee Required 32003 usm uss 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DONGED-E-MILLIAN CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 Zip Code 3 City Deputer DALIC 8. The above named entity submits this statement for the pyrose 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 age SIGNATURE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Added to Fees Trust Fund Contribution. Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Change ☐ Addition TITLE ☐ Delete NAME FOWLER, ANDREW NAME STREET ADDRESS STREET ADDRESS 1560 WALNUT CREEK DRIVE

CITY-ST-ZIP CITY-ST-7IP **ORANGE PARK FL 32003** BOGOT, KEN TITLE ☐ Delete TITLE 544 MAJESTIC WOOD NAME NAME BAGOT, KEN Milburn Donard L Change & Addition STREET ADDRESS 1559 DOLPHIN COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORANGE PARK FL 32073 TITLE TITI F ☐ Delete 5836 Cedar Pur Terrace NAME NAME MILBURN, DON STREET ADDRESS STREET ADDRESS 3690 CHERRY HILLS COURT GRANLES PARK 32003 CITY-ST-ZIP CITY-ST-7IP **GREEN COVE SPRINGS FL 32043** Addition TITLE ☐ Defete NAMES MILBURN NAME NAME

NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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TITLE

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backsonville

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 any 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 recipied for trustage 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 abuvered. changed, or on an attachme

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-7IP

CITY-ST-71P

SIGNATURE AND TYPED OR PRINTED NAME OR SIGNING OF

Delete

Milbuer

☐ Addition