FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Feb 13, 2001 8:00 am DOCUMENT # P93000018310 **Secretary of State** TEQUESTA DEVELOPMENT, INC. 02-13-2001 90133 001 ***300.00 Principal Place of Business Mailing Address 501 BRICKELL KEY DR. #102 501 BRICKELL KEY DR. #102 % GREGG E. TOLAND % GREGG E. TOLAND 25995 MIAMI FL 33131 MIAMI FL 33131 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0401458 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent TOLAND, GREGG E Street Address (P.O. Box Number is Not Acceptable) 501 BRICKELL KEY DR. #102 **MIAMI FL 33131** 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. TITLE Delete KERR, KEITH G NAME NAME STREET ADDRESS 501 BRICKELL KEY DRIVE #600 STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 TITLE Delete TITLE 🔽 Addition TOLAND, GREGG L NAME STREET ADDRESS STREET ADDRESS 501 BRICKELL DRIVE #600 CITY-ST-7IP CITY-ST-ZIP **MIAMI FL 33131** PO TITLE ☐ Delete TITLE ☐ Change X Addition OWENS, STEPHEN L NAME NAME 501 BRICKELL KEY DRIVE #600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMJ FL 33131 VPO Addition ☐ Delete ☐ Change TITLE TITLE KELLY, J. MEGAN NAME NAME STREET ADDRESS 501 BRICKELL KEY DRIVE #600 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAM! FL 33131 **AS** TITLE ☐ Delete ☐ Change Addition TITLE CARBY, BEVERLY C NAME NAME STREET ADDRESS 501 BRICKELL KEY DRIVE #600 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

BEVELLY CARBY

SIGNATURE AND TIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2601

305 371.3877