## **2001 UNIFORM BUSINESS REPORT (UBR)**

## **FILED** Mar 26, 2001 8:00 am Secretary of State DOCUMENT # **P9400007957** COUNTRY CLUB HILLS DEVELOPMENT CO., INC. 03-26-2001 90158 006 \*\*\*150.00 Principal Place of Business Mailing Address 2000 COUNTRY CLUB DRIVE 2000 COUNTRY CLUB DRIVE EUSTIS FL 32726 EUSTIS FL 32726 US US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 59-3230299 Not Applicable Zip Country 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 CORPORATION INFORMATION SERVICES INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS ST. Duntry TALLAHASSEE FL 32301 Zip Code **3212** 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) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Change ☐ Addition TITLE TITLE ☐ Delete **ROU. ANN HUFFSTETLE** NAME NAME 2000 COUNTRY CLUB DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **EUSTIS FL 32726** Change ☐ Addition DST Delete TITLE NAME WOODBURY, JENNIFER R NAME STREET ADDRESS 1316 BELLEAIRE CIRCLE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32804 ☐ Delete □ Change -- ☐ Addition TITLE TITLE NAME HUFFSTETLER, L.R. III STREET ADDRESS 2880 LAKESHORE DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAVARES FL 32778 Change ☐ Addition ☐ Delete TITLE TITLE GIRASDIN, WENDY H NAME NAME STREET ADDRESS STREET ADDRESS 1630 BONITA CT. CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34102 Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME

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

STREET ADDRESS

CITY-ST-ZIP

Dp Am 4/ #5totler Pa 3/21/01 (852)483-2880

STREET ADDRESS