2001 UNIFORM BUSINESS REPORT (UBR) FILED Mar 01, 2001 8:00 am Secretary of State DOCUMENT # **P9400040300** WHISPERING OAKS GOLF AND COUNTRY CLUB, INC. 03-01-2001 90010 029 ***150.00 Principal Place of Business Mailing Address 34450 WHISPERING OAKS BLVD. 2550 N. LOOP WEST 344364 RIDGE MANOR FL 33525 STE. #400 HOUSTON TX 77092 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 59-3247144 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KEATING, JOHN K Street Address (P.O. Box Number is Not Acceptable) 749 NORTH GARLAND AVENUE STE. #101 ORLANDO FL 32801 Zip Code FL 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. (NOTE: Registered Agent signature required when reinstating) 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 11, OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE DPT TITLE Change ☐ Addition CR2E034 (10/00 X Delete NAME KETTLE, JOHN E NAME STREET ADDRESS STREET ADDRESS 5284 ISLEWORTH COUNTRY CLUB DR CITY-ST-ZIP CITY-ST-ZIP WINDERMER FL Delete TITLE Change ☐ Addition TITLE KETTLE, ANNE R NAME MAME STREET ADDRESS 5284 ISLE WORTH COUNTRY CLUB DR STREET ADDRESS CITY-ST-71P CITY-ST-ZIP WINDEMERE FL 34786 TITLE ☐ Delete TITLE Change ☐ Addition FLOYD, MARIA NAME NAME STREET ADDRESS STREET ADDRESS 231 ROYAL PLAM WAY, SUITE 100 C1TY-ST-ZIP CITY - ST - 7IP PALM BEACH FL 33480 Addition Change TITLE ☐ Delete TITLE FLOYD, RAYMOND L NAME NAME STREET ADDRESS STREET ADDRESS 231 ROYAL PALM WAY, STE 100 CITY-ST-7IP CITY-ST-ZIP PALM BEACH FL 33480 Change ■ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

CITY-ST-ZIP

DIRECTOR

Leb 22, 2001 4078763