2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # **P95000030208** Apr 04, 2000 8:00 am Secretary of State 1. Entity Name DOUGLAS LANDING DEVELOPMENT COMPANY, INC. 04-04-2000 90054 006 ***150.00 Principal Place of Business Mailing Address 751 DOUGLAS LANDING RD 11 BEACHSIDE DR WEWAHITCHKA FL 32465 SANTA ROSA BEACH FL 32459-6655 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-3307414 Not Applicable 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 vann. Eugene n Street Address (P.O. Box Number is Not Acceptable) Change 11 BEACHSIDE DRIVE ~#914_ SANTA ROSA BEACH FL 32459 Zip Code City 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. DATE (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, 2000 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 PD ☐ Delete TITLE ☐ Change Addition NAME VANN, DAVID J NAME STREET ADDRESS STREET ADDRESS 2831 HIGHLAND AVE, APT 710 CITY-ST-ZIP CITY-ST-ZIP **BIRMINGHAM AL 35205** 🔽 Change ___ Addition **EVPD** Delete TITLE TITLE NAME VANN, EUGENE N NAME 24 JoAnna Drive STREET ADDRESS STREET ADDRESS 11 BEACHSIDE DR., #914 CITY-ST-7IP CITY-ST-ZIP

SANTA ROSA BEACH FL 32459 Addition TITLE 2VPD Delete TITLE Change NAME HILTY, ROSE V NAME STREET ADDRESS STREET ADDRESS 2241 4TH ST CITY-ST-ZIP CITY-ST-7IP BOULDER CO 80301 Change ☐ Delete TITLE Addition TITLE 24 JoAnna Drive NAME VANN, DONNA STREET ADDRESS STREET ADDRESS '11 BEACHSIDE DR., #914-CITY-ST-ZIF CITY-ST-ZIP SANTA ROSA BEACH FL 32459 TITLE ☐ Defete TITLE ☐ Change Addition NAME OLIVER, II, JOHN P NAME STREET ADDRESS STREET ADDRESS 324 SMOKERISE CITY-ST-ZIF CITY-ST-ZIP DADEVILLE AL 36853 Change Addition TITLE 1VPD ☐ Delete TITLE NAME NAME OLIVER, MELISSA STREET ADDRESS STREET ADDRESS 324 SMOKERISE

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.

CITY-ST-ZIP

SIGNATURE:

DADEVILLE AL 36853

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

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