## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## **FILED** DOCUMENT # P95000037431 May 17, 2000 8:00 am Secretary of State 1. Entity Name **ECOSYSTEMS LAND MITIGATION BANK III CORPORATION** 05-17-2000 90922 024 \*\*\*158.75 Principal Place of Business Mailing Address 1555 HOWELL BRANCH RD. 1555 HOWELL BRANCH RD. WINTER PARK FL 32789-1109 SUITE C-200 WINTER PARK FL 32789-1109 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3321557 Not Applicable 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 J. Lindsay Builder, Jr. Jurgens, J.A. Street Address (P.O. Box Number is Not Acceptable) Graham, Clark, Jones, Builder, Pratt & Marks 505 WEKIVA SPRINGS RD **STE 800** 369 N. New York Avenue LONGWOOD FL 32779 Zip Code Winter Park 32789 submilighthis statement for the purpose of charging its registered office or registered agent, or both, in the State of Florida. 8. The above named anti-4/12/00 SIGNATURE (NOTE: Registered Agent signature required when reinstating) 4LE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) $\Box$ Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PD TITLE ☐ Change Addition TITLE ☐ Delete MCCARTHY, D. MILLER NAME NAME STREET ADDRESS STREET ADDRESS 729 ALBA DR. CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL DVP ☐ Change ☐ Addition Delete TITLE TITLE GERBER, WILLIAM G STREET ADDRESS 1555 HOWELL BRANCH RD, STE C-200 STREET ADDRESS CITY-ST-ZIF WINTER PARK FL 32789 CITY-ST-ZIP Addition-·- 🖃 Change ☐ Delete TITLE TITLE FICKETT, ALAN G NAME NAME 1555 HOWELL BRANCH RD STE C-200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIF WINTER PARK FL CITY-ST-ZIP Change Addition TITI E ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS Margar Deal of CITY-ST-ZIP 1 CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 key provieted.