## 2003 FOR PROFIT CORPORATION

## FILED Apr 14, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** P96000043662 DOCUMENT # 04-14-2003 90361 002 \*\*\*150.00 1. Entity Name OYSTER CREEK REALTY, INC. Mailing Address Principal Place of Business 8407 GATEWAY COURT C/O VERNON HOMES 899 74 W. Com. 198 ENGLEWOOD FL 34224 390 DONALD E SMITH BLVD DEBARY FL 32713 2. Principal Place of Business Mailing Address 2415 WILDERNESS Blud L Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State Tity & State 4. FEI Number FL 65-0670908 Not Applicable 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 ARSENAULT, KENNETH G JR 10225 ULMERTON ROAD #2 LARGO FL 34641 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. I am familiar with, and accept the obligations of SIGNATURE ature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!!--FEE-IS-\$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Change ☐ Addition ☐ Delete TITLE TITLE 3201 Bayou Sound NAME vernon, William G NAME 390 DONALD E SMITH BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DEBARY FL 32713 CITY-ST-ZIP Delete TITLE TITLE AFFLEBACH, JOHN NAME NAME STREET ADDRESS STREET ADDRESS 390 DONALD E SMITH BLVD CITY-ST-ZIP CITY-ST-ZIP DEBARY FL 32713 ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE Addition TITLE ☐ Delete NAME NAME

12. 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 10 or Block 11 if changed, or on an attachment, with an address with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP