2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 01, 2000 8:00 am Secretary of State DOCUMENT # **P96000062680** VALLEY DEVELOPMENT CORPORATION, INC. 03-01-2000 90019 008 ***150.00 ncipal Place of Business 35 YACHT CLUB DRIVE LOCAL PARKHAY YACHT CLUB DEING D0026793 FT WALTON BEACH FL 32548 FT WALTON BEACH FL 32548 2. Principal Place of Business 3. Mailing Address 255 Yacht Club 255 Yacht Club Dr Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-3396177 Fort Walton Fort Walton Not Applicable Country Okaloosa \$8.75 Additional 5. Certificate of Status Desired 32548 Okaloosa Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WALKER, WINSTON G Street Address (P.O. Box Number is Not Acceptable) 71 N BEAL PARKWAY FT WALTON BEACH FL 32548 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 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 11. CR2E034 (9/99) Addition ☐ Delete TITLE Change TITLE SHEPHEARD, GERTRUDE T NAME NAME STREET ADDRESS STREET ADDRESS 457 VANDERHEIDE RD CITY-ST-ZIP CITY-ST-ZIP **DEFUNIAK SPRINGS FL 32433** ☐ Delete TITLE ☐ Addition TITLE NICHOLSON, WILLIAM F NAME NAME STREET ADDRESS STREET ADDRESS 24 WALTER MARTIN RD NE CITY-ST-ZIP CITY-ST-ZIP FORT WALTON BEACH FL 32548 ☐ Addition ☐ Delete TITLE TITLE READY, JAMES M NAME NAME 105 Yacht Club Dr NE STREET ADDRESS STREET ADDRESS P O BOX 4400 N/A Fort Walton Beach, FC 32549 CITY-ST-ZIP CITY-ST-ZIP FT WALTON BEACH FL 32549 ☐ Addition ☐ Delete TITLE TITLE WALKER, WINSTON G NAME NAME 255 Yacht Club Dr. STREET ADDRESS P O BOX 4400 N/A STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT WALTON BEACH FL 32549 ☐ Addition TITLE ☐ Delete NAME

13. Thereby 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 eath; 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

TITLE NAME

STREET ADDRESS CITY-ST-7IP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF

☐ Delete

☐ Change

Addition