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**FILED** 

4/27/2001 904-255-6018

## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## May 15, 2001 8:00 a Secretary of State DOCUMENT # **P96000069135** 1. Entity Name 05-15-2001 90158 021 \*\*\*150.00 MELROSE PROPERTIES, INC. Principal Place of Business Mailing Address 825 DERBYSHIRE ROAD DAYTONA BEACH FL 32117 825 DERBYSHIRE ROAD DAYTONA BEACH FL 32117 D0051580 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 59-3399650 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) PICKENS, JOE H 222 N THIRD STREET PALATKA FL 32177 SUNWOOD TRAIL ORMOND BEACH this statement for the pypose of changing its registered office or registered agent, or both, in the State of Florida (NOTE: Registered Agent signature required when reinstating This corporation is eligible to satisfy its Inte Tax filing requirement and elects to do so. FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PTD TITLE ☐ Delete TITLE BROWN, RANDY NAME NAME 825 DERBYSHIRE RD STREET ADDRESS STREET ADDRESS 3R2E034 DAYTONA BEACHF FL 32117 CITY-ST-ZIP CITY-ST-ZIP DIRECTOR ☐ Chance TITLE ■ Delete TITLE Addition JOHN DOYLE DEWKETT, DAVE NAME 127 PONCE DELEON PLACE 284 UNION AVENUE STREET ADDRESS STREET ADDRESS PONCE INLET, FL, 32127 **CRESCENET CITY FL 32112** CITY-ST-ZIP CITY-ST-7IP DIRECTOR TITLE Delete TITLE ☐ Change Addition Bob Lu DLow NAME NAME 160 N. NOVA ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORMOND BEACH PL. 32174 DIRECTOR TITLE ☐ Delete TITLE PAT CODD NAME NA:ME OU LEMON ST. STREET ADDRESS STREET ADDRESS CITY-ST-7IP CRESCENT CITY FL. 3211 CITY-ST-7IP ☐ Delete TITLE X Addition John BosTwick NAME NAME 340 RIDGEWOOD AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-Z\P PORT ORANGE, Fx. 32127 TITLE Delete DIRECTOR ED DYTKO NAME STREET ADDRESS 1804 WRIGHT DR STREET ADDRESS CITY-ST-ZIP DAYTONA BRACK PL. 32119 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.

OFFICER OR DIRECTOR