

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 APR -9 AM 8:36

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P96000073645 1. Entity Name FOUR PONDS ESTATES, INC.					
Principal Place of Business 8067 WOODVILLE HIGHWAY TALLAHASSEE, FL 32311			Mailing Address % NANETTE CAUSSEAU P.O. BOX 1229 WOODVILLE, FL 32362		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number	
5. Certificate of Status Desired				☐ Applied For ☒ Not Applicable	
6. Name and Address of Current Registered Agent LAMB, MARION D III 1972 RAYMOND DIEHL ROAD TALLAHASSEE, FL 32308					
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code					
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 registered agent. SIGNATURE _____ DATE _____ (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when releasing))					
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
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 file empowered.					
SIGNATURE: <i>Nanette Causseau, Pres.</i> 4/9/03 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

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☐ CHECK HERE IF MAKING CHANGES

CFR2034 (10/02)