

FILED
May 16, 2000 8:00 am
Secretary of State

[REDACTED]

DO NOT WRITE IN THESE SPACES

DOCUMENT # P97000068081 TRADITION CLUBHOUSE, INC.				May 16, 2000 8:00 a Secretary of State 05-16-2000 90001 043 ***150.00	
1. Registered Office of Registrant 300 ROYAL PALM BCH BLVD ROYAL PALM BCH FL 33411 US			2. Mailing Address 300 ROYAL PALM BCH BLVD ROYAL PALM BCH FL 33411-2354 US		
3. Registered Office of Registrant 			3. Mailing Address 		
4. Type of Filing 			5. State, Apt. #, etc. 		
6. City & State 			7. City & State 		
8. Country 			9. Zip 		
10. Country 			11. Zip 		
12. Name and Address of Current Registered Agent 			13. Name and Address of New Registered Agent 		
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10. The undersigned hereby certifies that the foregoing is a true and correct copy of the original as the same appears in the records of the State of Florida.

1991, p. 179)

[illegible]

DATE RECEIVED: _____

9 1 5 9 8

1. Full Name (Printed Name) (Last, First, Middle Initial) DANIEL J. CARR 2. Address (Street, City, State, Zip) 2821 MURFIELD CT WELLINGTON FL 33414	3. Date of Birth (MM/DD/YYYY) ☐ Male ☐ Female 4. Date of Birth (MM/DD/YYYY) ☐ Male ☐ Female 5. Date of Birth (MM/DD/YYYY) ☐ Male ☐ Female 6. Date of Birth (MM/DD/YYYY) ☐ Male ☐ Female 7. Date of Birth (MM/DD/YYYY) ☐ Male ☐ Female 8. Date of Birth (MM/DD/YYYY) ☐ Male ☐ Female 9. Date of Birth (MM/DD/YYYY) ☐ Male ☐ Female	10. Election (Check one) ☒ General ☐ Special 11. Amount of Contribution (Check one) ☒ \$10.00 ☐ \$20.00 ☐ \$50.00 ☐ \$100.00 ☐ Other 12. Name of Candidate (Printed Name) DANIEL J. CARR 13. Address (Street, City, State, Zip) 2821 MURFIELD CT WELLINGTON FL 33414 14. Name of Candidate (Printed Name) DANIEL J. CARR 15. Address (Street, City, State, Zip) 2821 MURFIELD CT WELLINGTON FL 33414 16. Name of Candidate (Printed Name) DANIEL J. CARR 17. Address (Street, City, State, Zip) 2821 MURFIELD CT WELLINGTON FL 33414 18. Name of Candidate (Printed Name) DANIEL J. CARR 19. Address (Street, City, State, Zip) 2821 MURFIELD CT WELLINGTON FL 33414
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(1)(g), Florida Statutes. I further certify that the information is not related to the report of a confidential source in a true and accurate and that my signature shall have the same legal effect as if it were under oath, that I am an officer or director of the corporation, and I am the president or chief executive officer of the corporation, and I am authorized to execute this report as required by Chapter 607, Florida Statutes, and that my sworn statement is true and correct.

SIGNATURE: 
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DEPUTY